## **SEEC FORM 30**

Itemized Campaign Finance Disclosure Statement
Candidates for Statewide Offices and General Assembly
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Rev. 1/08



Electronic Filing

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Page 1 of 244

## **SUMMARY PAGE**

1.NAME OF COMMITTEE	NAME OF COMMITTEE										
Dan Malloy For Connec	ticut (CT)						x	Candidate Committee Exploratory Committee			
3. TREASURER NAME											
Title	First <b>Len</b>			MI <b>S</b>	Last Miller			Suffix			
4. TREASURER ADDRESS											
Street Address			City			State		Zip Code			
8 Kings Ln			Essex			СТ		06426			
5. ELECTION DATE			6. O	FFICE SOUG	HT ( if applicable )		7. DISTR	AICT CODE (if applicable)			
11/02/2010											
8. CANDIDATE NAME						-					
Title	First <b>Dannel</b>			MI <b>P.</b>	Last <b>Malloy</b>			Suffix			
9. TYPE OF REPORT											
October 10 Filing - Original											
10. PERIOD COVERED											
		Beginning Date			Ending Date						
		07/01/2009	thru	1	09/30/2009						
			11 CED	TIEICATION							
			II. CER	TIFICATION							
	ed Campaig				of the information set forth period covered is true,						
Electronic Filing		Len Miller			10/13	3/2009					
SIGNATURE		PRINT NAME OF THI	E SIGNE	ER		CERTIFIED					
					LE BY FINE NOT TO EXCEED HAN ONE YEAR, OR BOTH.						

SEEC FORM 30 Itemized Campaign Finance Disclosure Statement Candidates for Statewide Offices and General Assembly CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION Rev. 1/08

## **SUMMARY PAGE TOTALS**

	1					
NAME OF COMMITTEE	FILING DUE DATE					
Dan Malloy For Connecticut (CT)	Original 10/13/2009					
	COLUMN A This Period	COLUMN B Aggregate				
12. Balance on hand from day Committee was formed		\$0.00				
13. Balance on hand at the beginning of Reporting Period	\$193,971.37					
14. Contributions received from Individuals (Section A and B)	\$103,598.00	\$376,133.00				
15. Receipts from Other Committees (Sections C1 + C2)	\$1,125.00	\$5,050.00				
16. Other Monetary Receipts (Section D-I)	\$0.00	\$375.00				
17. Total Proceeds from Tag Sales, Auctions or Other Sales (Section J2)	\$0.00	\$0.00				
18. Total Monetary Receipts (add totals for lines 14-17)	\$104,723.00	\$381,558.00				
19. Subtotals (add totals in line 13 + line 18 in Column A and in lines 12 + 18 in Column B)	\$298,694.37	\$381,558.00				
20. Expenses Paid by Committee (Section N)	\$144,749.83	\$227,613.46				
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19)	\$153,944.54	\$153,944.54				
22. In-Kind Donations not Considered Contributions Received (Section J3)	\$385.00	\$2,085.96				
23. In-Kind Contributions Received (Section K)	\$0.00	\$0.00				
24. Refundable Deposit to Telephone Company (Section L)	\$0.00	\$0.00				
25. Receipts of Organization Expenditures (Section M)	\$0.00	\$0.00				
26. Beginning Loan Balance	\$0.00	\$0.00				
26a. + Loans Received (Section D)	\$0.00	\$0.00				
26b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00				
26c Payments on Loan(s)	\$0.00	\$0.00				
26d. Total Outstanding Loan Amount	\$0.00	\$0.00				
27. Campaign Expenses Paid By Candidate (Section O)	\$0.00	\$455.05				
28. Expenses Incurred on Committee Credit Card (Section P)	\$0.00	\$0.00				
29. Expenses Incurred by Committee During this Period but Not Paid (Section Q)	\$2,054.89					
29a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section Q)	\$2,054.89					

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
A. Total Contributions from	n Small (	Contribu	tors-Received th	is Perio	d ONLV	7				
(See instructions for definition of Small			itors received th	15 1 0110		total Section A	\$0.00			
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID #	Amount of
Orleans	Jonathan				Cash Money	= =	al Check Debit Card	1215		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
87 Bayberry Rd		Fairfield			СТ	06825-2742	0	7/02/2009	9	
Principal Occupation lawyer		Name of Er Pullman	nployer & Comley LLC			Is this contribution ass fundraising event listed If yes, list Event #		J1?	Yes No	
				_		II yes, list Event #				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Yes X No	dependent	child of a lob	byist?	Aggre	egate Contribu	tions \$50.00	\$50.00
Last Name	First Name			MI		contribution:		10.11	ID.//	
Joseph	Andrew			IVII	Cash	Person	al Check Debit Card	Contribution 1216	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Г	ate Received		
148 Beekman Rd		Summit			NJ	07901-1724	0	7/02/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution ass	ociated with	а Г	Yes	
Commercial Real Estate		George (	Comfort & Sons			fundraising event liste If yes, list Event #	d in Section .	J1? <b>x</b>	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No		utor a lobbyist child of a lob	byist?	Aggre	egate Contribu	itions 150.00	\$150.00
government the contract is with:  Last Name	First Name			I MI		contribution:			TD //	
Deckey	Robert			IVII	Cash		al Check	Contribution 1217	on ID#	Amount of Contribution
					Money	Order X Credit/	Debit Card	1217		
Residential Street Address		City			State	Zip Code	Б	ate Received		
136 E 64th St # 3B		New York	(		NY	10065-7360	0	7/02/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution ass			Yes	
Real Estate		George (	Comfort & Sons			fundraising event liste If yes, list Event #	a in Section .	)1?   <b>X</b>	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyist	-	Aggre	gate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I -	child of a lob	•		\$1	100.00	\$100.00
Last Name	First Name			MI		contribution:		Contribution	on ID#	Amount of
Kovel	Dara			K	Cash Money	=	al Check Debit Card	1218		Contribution
Residential Street Address		City			State	Zip Code	Г	ate Received		
85 Livingston St		New Hav	en		CT	06511-2409		7/06/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution ass	ociated with	а Г	Yes	ĺ
Partner-Connecticut Office		l	n Rose Companies			fundraising event listed If yes, list Event #	d in Section .	J1?	] No	
Is contributor a principal of a state contractor	or prospective	-	X Yes No		utor a lobbyist	-	Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	es X	-		\$1	100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name Smith	First Name Walter		MI V	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 12	ntribution ID #	Amount of Contribution
Residential Street Address 97 W Hill Rd		City Stamford		State CT	Zip Code 06902-1705	Date Re	eceived 0/2009	
Principal Occupation Tax Attorney		Name of Employer Self-Employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name King	First Name Donna		MI I	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 12	ntribution ID#	Amount of Contribution
Residential Street Address 71 Aiken St Apt Q16		City Norwalk		State CT	Zip Code 06851-2144	Date Re 07/10	eceived 0/2009	
Principal Occupation  Exec. Assistant		Name of Employer State of CT, Office of the Tre	asurer		Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$150.00	\$50.00
Last Name Thomas	First Name Kyle		MI M	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 12	ntribution ID #	Amount of Contribution
Residential Street Address 402 Brookside Ct		City Manchester		State CT	Zip Code 06042-7114	Date Re	eceived L/2009	
Principal Occupation Legislative Aide		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$5.00	\$5.00
Last Name Moffly	First Name Jonathan		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 12	ntribution ID#	Amount of Contribution
Residential Street Address 205 Main St		City Westport		State CT	Zip Code 06880-3206	Date Re 07/12	eceived 2/2009	
Principal Occupation publisher		Name of Employer moffly media		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$200.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name Walsh	First Name Kathleen		MI E	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 12	ontribution ID #	Amount of Contribution
Residential Street Address 426 Rock Rimmon Rd		City Stamford		State CT	Zip Code 06903-2811		eceived 2/2009	
Principal Occupation President & CEO		Name of Employer Stamford Partnership, Inc.			Is this contribution associa fundraising event listed in If yes, list Event # 072		X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$300.00	\$100.00
Last Name Rothman	First Name Howard		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 12	ontribution ID #	Amount of Contribution
Residential Street Address 1336 Newfield Ave		City Stamford		State CT	Zip Code 06905-1413		eceived 3/2009	<u> </u>
Principal Occupation financial executive		Name of Employer Vision Financial Markets LLC			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$375.00	\$375.00
Last Name Rothman	First Name Gayle		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 12	ontribution ID #	Amount of Contribution
Residential Street Address 1336 Newfield Ave		City Stamford		State CT	Zip Code 06905-1413		eceived 3/2009	
Principal Occupation speech pathologist		Name of Employer eagle hill school, Greenwich	СТ		Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$375.00	\$375.00
Last Name Bouchard Mudry	First Name Joella		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 12	ontribution ID #	Amount of Contribution
Residential Street Address 25 Rogers Rd		City Bristol		State CT	Zip Code 06010-7949		eceived 3/2009	
Principal Occupation retired/healthcare organizer		Name of Employer none listed		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$25.00	\$25.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							FI	ILING D	OUE DATE
Dan Malloy For Connecticut (C	T)						Oı	riginal	10/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals		•		
Last Name Cochran	First Name John		MI T	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1	Contribution ID	)#	Amount of Contribution
Residential Street Address 3801 Center Way		City Fairfax		State VA	Zip Code 22033-2645		Received 13/2009		
Principal Occupation none listed		Name of Employer US Conference of Mayors			Is this contribution associa fundraising event listed in If yes, list Event #		X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	te Contributions \$375.		\$375.00
Last Name Friedler	First Name Joseph		MI P	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1	Contribution ID	<b>)</b> #	Amount of Contribution
Residential Street Address 96 Taintor Dr		City Southport		State CT	Zip Code 06890-1380		Received 13/2009		
Principal Occupation Attorney		Name of Employer Friedler & Friedler PC			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Ye		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	te Contributions \$100.		\$100.00
Last Name Stratton	First Name Brian		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1	Contribution ID	)#	Amount of Contribution
Residential Street Address 729 Decamp Ave		City Schenectady		State NY	Zip Code 12309-6009		Received 13/2009		
Principal Occupation mayor		Name of Employer City of Schenectady			Is this contribution associa fundraising event listed in If yes, list Event #		X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	se Contributions \$100.		\$100.00
Last Name James	First Name Juanita		MI T	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck 1	Contribution ID	)#	Amount of Contribution
Residential Street Address 101 Dogwood Ln		City Stamford		State CT	Zip Code 06903-4532		Received 13/2009		
Principal Occupation Chief Marketing Officer		Name of Employer Pitney Bowes, Inc.			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Ye		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	te Contributions \$375.		\$375.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (CT)	)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ons from	Individu	ıals				
Last Name F	irst Name			MI	Method of	contribution:		Contribution	on ID #	Amount of
Nemec M	4ichael			Р	Cash Money	y Order X Personal	Check ebit Card	1226		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
25 Adams Ave Unit 110		Stamford			CT	06902-3785		7/13/2009		
Principal Occupation		Name of En	nployer			Is this contribution associated		1^	Yes	
n/a		n/a		_		fundraising event listed  If yes, list Event # 0	7212009		No	
Is contributor a principal of a state contractor or p	prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Î	child of a lob	•		\$1	125.00	\$25.00
	irst Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Melzer S	Sondra				Cash Money	x Personal y Order Credit/D	Check ebit Card	1225	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
180 Turn of River Rd Unit 1D		Stamford			СТ	06905-1331	C	7/13/2009	9	
Principal Occupation		Name of En				Is this contribution asso fundraising event listed		1^	Yes	
professor		Sacred H	leart University			If yes, list Event # 0			No	
Is contributor a principal of a state contractor or p state contractor? Is yes, indicate which branch or branches of government the contract is with:	prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	itions \$50.00	\$50.00
	irst Name			MI	Method of	contribution:		Contribution	on ID #	Amount of
Samers	dith			М	Cash Money	Personal y Order X Credit/D	Check ebit Card	1237	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
180 Big Oak Rd		Stamford			СТ	06903-4608	C	7/13/2009	9	
Principal Occupation		Name of En				Is this contribution asso fundraising event listed		a <b>x</b>	Yes	
marketing		Shalom 1	TV			If yes, list Event # 0			No	
Is contributor a principal of a state contractor or p	prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П		_	Î	child of a lob	•		\$2	250.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	1			<u> </u>		
	irst Name dward			MI	Method of Cash	contribution: Personal	Check	Contribution	on ID #	Amount of Contribution
Siliti					_	y Order X Credit/D	ebit Card	1238		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
180 Big Oak Rd		Stamford			СТ	06903-4608	C	07/13/2009	9	
Principal Occupation		Name of En	nployer			Is this contribution assortiundraising event listed		1^	Yes	
Retired		n/a				If yes, list Event # 0			No	
Is contributor a principal of a state contractor or p	prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	child of a lob	-		\$1	100.00	\$100.00
government the contract is with:		LACCULIVE	Legislative			110				

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Kohn	Herbert			В	Cash Money	y Order X Persona Credit/I	l Check Debit Card	1227		Contribution
Residential Street Address	•	City		•	State	Zip Code	Ι	Date Received		
6 Kenilworth Dr E		Stamford	I		СТ	06902-7116	C	07/13/2009	9	
Principal Occupation		Name of Er	nployer		•	Is this contribution asso		1^	Yes	ĺ
operations		city of S	tamford			fundraising event listed If yes, list Event # <u>C</u>	in Section 17212009		No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No	1	utor a lobbyis child of a lob	-	Aggre	egate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 <sup>-</sup>	res x	•		\$1	150.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Hanson	Eric			R	Cash Money	y Order X Persona Credit/I	l Check Debit Card	1224	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
285 Cordova Rd		West Pali	m Beach		FL	33401-8003	c	07/13/2009	9	
Principal Occupation		Name of Er	nployer			Is this contribution asso			Yes	
CEO		US Strat	egies Corp			fundraising event listed If yes, list Event #	in Section	J1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	•	Yes X No	1	utor a lobbyis child of a lob	byist?	Aggro	egate Contribu	itions 375.00	\$375.00
government the contract is with:		Executive	Legislative	L	res X	No		_		
Last Name	First Name			MI		contribution:	1 Charle	Contributio	on ID#	Amount of
Cicilline	David				Cash Money	=	Debit Card	1228		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
702 Elmgrove Ave		Providen	ce		RI	02906-4900	C	07/13/2009	9	
Principal Occupation		Name of Er				Is this contribution asso fundraising event listed			Yes	
Mayor		City of P	rovidence, RI			If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of				I -	child of a lob	•		\$3	375.00	\$375.00
government the contract is with:	<u> </u>	Executive	Legislative	<del>                                     </del>	res X			1		
Last Name Chadwick	First Name Patricia			MI A	Method of Cash	contribution:	l Check	Contributio	on ID #	Amount of Contribution
Chauwick	ratificia			, , , , , , , , , , , , , , , , , , ,		=	Debit Card	1229		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
160 Old Post Rd		Tolland			СТ	06084-3306		07/13/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution asso fundraising event listed		J1?	Yes	
n/a		n/a				If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No	1	utor a lobbyis	-	Aggre	egate Contribu	itions	Ì
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		\$	\$10.00	\$10.00
government the contract is with:		Executive	Legislative	L 1	res X	No				1

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	TT)								Origina	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name Chadwick	First Name Roger			MI	Cash	contribution:    X   Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address 160 Old Post Rd		City Tolland			State CT	Zip Code 06084-3306		Date Received 07/14/2009		
Principal Occupation n/a		Name of E	mployer			Is this contribution associ- fundraising event listed in If yes, list Event #		J1? <b>ப</b>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut	ions 10.00	\$10.00
Last Name Blum	First Name Irving			MI M	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 1251	n ID#	Amount of Contribution
Residential Street Address 54 W North St Apt 416		City Stamford	i		State CT	Zip Code 06902-2227		Date Received 07/14/2009		
Principal Occupation accountant		Name of E	mployer		-	Is this contribution associ- fundraising event listed in If yes, list Event # 072		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut	ions 50.00	\$50.00
Last Name Nixon	First Name Lea			MI D	Cash	contribution:  X Personal C y Order Credit/Del		Contribution	ı ID#	Amount of Contribution
Residential Street Address 337 Mayapple Rd		City Stamford	1		State CT	Zip Code 06903-1310		Date Received 07/14/2009		
Principal Occupation  Retired		Name of E	mployer			Is this contribution associ- fundraising event listed in If yes, list Event # 072	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut	ions 00.00	\$100.00
Last Name Nixon	First Name James			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 1248	ı ID#	Amount of Contribution
Residential Street Address 337 Mayapple Rd		City Stamford	i		State CT	Zip Code 06903-1310		Date Received 07/14/2009		
Principal Occupation retired		Name of E	mployer			Is this contribution associfundraising event listed in If yes, list Event # 073	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut	ions 00.00	\$100.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contribu	ıtions fron	n Individu	ıals		_	
Last Name	First Name		MI	Method of	contribution:	Cont	ribution ID #	Amount of
Wilson	Mary-Star	rke	Н	Cash Money	y Order X Personal Cl Credit/Deb	124	1	Contribution
Residential Street Address		City		State	Zip Code	Date Rec	eived	
122 Palmers Hill Rd Unit 1106		Stamford		СТ	06902-2135	07/14/	2009	1
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 072		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis it child of a lob Yes	t, spouse, or obyist?	Aggregate Co	ontributions \$65.00	\$40.00
Last Name Deragon	First Name Russell		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 124	ribution ID #	Amount of Contribution
Residential Street Address 97 W Main St Apt 88		City Niantic	•	State CT	Zip Code 06357-1732	Date Rec 07/14/		
Principal Occupation Episcopal Priest		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis at child of a lob	byist?	Aggregate Co	ontributions \$75.00	\$25.00
Last Name Havelock	First Name Scott		MI V	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 123	ribution ID #	Amount of Contribution
Residential Street Address 12 Pell Mell Dr		City Bethel	•	State CT	Zip Code 06801-1624	Date Rec 07/14/		
Principal Occupation Engineer		Name of Employer Kais Custom Builders			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis at child of a lob Yes	byist?	Aggregate Co	shtributions \$100.00	\$100.00
Last Name Kruger	First Name Konrad		MI R	Cash	contribution:    X   Personal Cl	heck 124	ribution ID #	Amount of Contribution
Residential Street Address 2 Seagate Rd		City Riverside	•	State CT	Zip Code 06878-2618	Date Rec 07/14/		
Principal Occupation  Managing Member		Name of Employer Five Mile Capital			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis at child of a lob	byist?	Aggregate Co	sharp	\$375.00

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	mized Contribution	ons from	Individu	ıals				
Last Name Galloway	First Name Ann			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 1246	on ID#	Amount of Contribution
Residential Street Address 71 Acre View Dr		City Stamford			State CT	Zip Code 06903-2510		ate Received 7/14/200		
Principal Occupation Retired		Name of Em retired	ployer			Is this contribution association fundraising event listed in If yes, list Event # 07		1? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Cahill	First Name William			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 1250	on ID#	Amount of Contribution
Residential Street Address 511 Shippan Ave Apt 1D		City Stamford			State CT	Zip Code 06902-6052		ate Received 7/14/200		
Principal Occupation retired		Name of Em none	ployer			Is this contribution associ fundraising event listed in If yes, list Event # 07	n Section J	1? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes		Aggre	gate Contribu	utions \$50.00	\$50.00
Last Name Hoffman	First Name David			мі G	Cash	contribution:  X Personal C y Order Credit/De		Contribution 1252	on ID#	Amount of Contribution
Residential Street Address 1500 E Layton Ave		City Englewood	d		State CO	Zip Code 80113-7038		ate Received 7/14/200		
Principal Occupation  Consultant		Name of Em				Is this contribution assoc fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x		Aggre	gate Contribu	ations 375.00	\$375.00
Last Name DeLuca	First Name Francis			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 1253	on ID#	Amount of Contribution
Residential Street Address 123 Starin Dr		City Stamford			State CT	Zip Code 06902-1909	1	ate Received 7/14/200		
Principal Occupation CEO		Name of Em DeLuca C	ployer Construction Co		•	Is this contribution associ fundraising event listed in If yes, list Event # 07	n Section J	1? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x		Aggre	gate Contribu	utions 100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FII	LING DUE DATE
Dan Malloy For Connecticut (C	T)						Ori	iginal 10/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name Graham	First Name Jesse		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 1	Contribution ID :	# Amount of Contribution
Residential Street Address 926 Rxr Plz		City Uniondale		State NY	Zip Code 11556-0926		Received 14/2009	
Principal Occupation attorney		Name of Employer Rivkin Radler LLP			Is this contribution associa fundraising event listed in If yes, list Event # 072		X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contributions \$150.0	\$100.00
Last Name Jukoski	First Name Mary Eller	1	MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1	Contribution ID	# Amount of Contribution
Residential Street Address 7 Mackinnon Pl		City East Lyme		State CT	Zip Code 06333-1534		Received 14/2009	
Principal Occupation college educator		Name of Employer Mitchell College			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions \$154.0	\$54.00
Last Name Friedlander	First Name Claire		MI D	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1	Contribution ID	# Amount of Contribution
Residential Street Address 33 Lolly Ln		City Stamford		State CT	Zip Code 06903-4810		Received 14/2009	
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contributions \$75.0	\$25.00
Last Name Callion	First Name William		MI S	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck 1	Contribution ID	# Amount of Contribution
Residential Street Address 35 W Broad St Apt 307		City Stamford		State CT	Zip Code 06902-3771		Received 14/2009	
Principal Occupation Director		Name of Employer City of Stamford			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions \$150.0	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							I	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(	Origina	al 10/13/2009
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Nelthropp	First Name Judy		MI A	Cash	contribution: Personal Cl y Order X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 47 Shag Bark Rd		City Stamford		State CT	Zip Code 06903-1638		e Received /15/2009		
Principal Occupation Office Manager		Name of Employer  Dermatology Center of Stam	ford		Is this contribution associa fundraising event listed in If yes, list Event # 072		11.		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ste Contributio	ons 0.00	\$100.00
Last Name Heichler	First Name Katherine		MI A	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck	Contribution 1	ID#	Amount of Contribution
Residential Street Address 166 Bouton St W		City Stamford		State CT	Zip Code 06907-1319		e Received /15/2009		
Principal Occupation Clergy		Name of Employer Church of Christ the Healer			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	11.		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00
Last Name Martin	First Name David		MI R	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 2121 Long Ridge Rd		City Stamford		State CT	Zip Code 06903-2105		e Received /16/2009		
Principal Occupation  consultant		Name of Employer Michael Allen Company			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio \$37!	ons 5.00	\$275.00
Last Name Davis	First Name Judith		MI T	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution 1	ID#	Amount of Contribution
Residential Street Address 164 Van Rensselaer Ave		City Stamford		State CT	Zip Code 06902-8212		e Received /16/2009		
Principal Occupation N/A		Name of Employer homemaker			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	11.		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio \$200	ons 0.00	\$200.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contributi	ions fron	Individu	ıals			
Last Name Lauderdale	First Name Valerie		MI	Cash	contribution:    X   Personal Cl	heck 1256	ntion ID#	Amount of Contribution
Residential Street Address 222 Old Church Rd		City Greenwich		State CT	Zip Code 06830-4823	Date Receive 07/16/20		
Principal Occupation Homemaker		Name of Employer Self Employed			Is this contribution associa fundraising event listed in If yes, list Event # 072		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	sbutions \$250.00	\$250.00
Last Name Sutton	First Name Anne		MI M	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 1257	ition ID#	Amount of Contribution
Residential Street Address 69 W Cross Rd		City New Canaan		State CT	Zip Code 06840-6542	Date Receive 07/16/20		
Principal Occupation Writer		Name of Employer Self Employed		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00
Last Name Mazik	First Name Phyllis		MI	Cash	contribution:  X Personal Cl  y Order Credit/Deb	heck 1260	ntion ID#	Amount of Contribution
Residential Street Address 37 Greenfield Rd		City Stamford		State CT	Zip Code 06906-1226	Date Receive 07/16/20		
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contr	sbutions \$50.00	\$50.00
Last Name Norman-Rosedam	First Name Kimberly		MI	Cash	contribution: Personal Cl  / Order X Credit/Deb	heck 1263	ntion ID#	Amount of Contribution
Residential Street Address 684 Frenchtown Rd		City Bridgeport		State CT	Zip Code 06606-1910	Date Receive 07/16/20		
Principal Occupation Construction and Real Estate		Name of Employer Rose Construction Company,	, LLC		Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob ves	byist?	Aggregate Contr	sbutions \$100.00	\$100.00

		I. MONE	TARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemized	l Contributi	ons from	Individu	ıals				
Last Name Sharp	First Name Gun			MI	Cash	contribution: Personal y Order X Credit/Do		Contribution 1264	on ID#	Amount of Contribution
Residential Street Address 27 Brodwood Dr		City Stamford			State CT	Zip Code 06902-1719		7/16/2009		
Principal Occupation Realtor		Name of Employer Wm Pitt Sotheb	y's			Is this contribution association fundraising event listed in If yes, list Event # 07			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Ye Executive Le	s X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Margolis	First Name Estelle			MI T	Cash	contribution:  X Personal  y Order Credit/Do		Contribution 1259	on ID#	Amount of Contribution
Residential Street Address 72 Myrtle Ave		City Westport			State CT	Zip Code 06880-3512		ate Received 7/16/2009		
Principal Occupation Architect/Artist		Name of Employer Self				Is this contribution assoc fundraising event listed in If yes, list Event # 07	n Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Ye Executive Le	s X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	tions \$50.00	\$50.00
Last Name Tarzia	First Name Joseph			MI R	Cash	contribution:  X Personal y Order Credit/Do		Contribution 1261	on ID#	Amount of Contribution
Residential Street Address 58 Deacon Hill Rd		City Stamford			State CT	Zip Code 06905-3011		ate Received 7/16/2009		
Principal Occupation building inspector		Name of Employer unemployed				Is this contribution assoc fundraising event listed in If yes, list Event # 07	n Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		s X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu \$1	utions 150.00	\$50.00
Last Name Fox	First Name Michael			MI D	Cash	contribution:  X Personal  y Order Credit/Do		Contribution 1267	on ID#	Amount of Contribution
Residential Street Address 45 Boettner Rd		City Pleasant Valley			State CT	Zip Code 06063-4126		ate Received 7/17/2009		
Principal Occupation retired		Name of Employer retired			•	Is this contribution assoc fundraising event listed i If yes, list Event # 07	n Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		s X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu \$2	utions 250.00	\$250.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons from	Individu	ıals			•	
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Engle	Anamy			R	Cash Mone	y Order X Personal C		1266		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received	I	
10 Stoney Point Rd		Westport	t		СТ	06880-5924	0	7/17/200	9	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		J1?	Yes	
full time mom		TI/ a				If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	, 1	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 î—	res x	•		:	\$10.00	\$10.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Ostuw	Cathy				Cash Mone	y Order X Credit/De		1269		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received	I	
32 Blackberry Dr		Stamford	t		СТ	06903-1205	O	7/17/200	9	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1.2	Yes	
Not Employed		Not Emp	pioyea			If yes, list Event # 07			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lot es	-		\$	100.00	\$100.00
Last Name	First Name			MI		contribution:	<u> </u>	Contributi	on ID#	Amount of
Sheingold	Richard			А	Cash Mone	Personal C  y Order X Credit/De		1268		Contribution
Residential Street Address		City			State	Zip Code	Б	Date Received	I	
56 Tannery Ln S		Weston			СТ	06883-1828	0	7/18/200	9	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		J1?	_	
private investor/consultant		self				If yes, list Event # 07			No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$	375.00	\$250.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
LaBonville	Lisa			А	Cash Mone	y Order X Credit/De		1270		Contribution
Residential Street Address	•	City		•	State	Zip Code	Е	ate Received	Į.	
135 Winding Crk		Old Tapp	an		NJ	07675-7343	0	7/20/200	9	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		J1?	Yes	
Not Employed		N/A				If yes, list Event # <u>07</u>			No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	-		\$	100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals		,		
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Ives	Richard				Cash Money	Personal C  V Order  X Credit/Det		1271		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
389 Pomfret Rd		Brooklyn			CT	06234-1523		7/20/2009	e	
Principal Occupation		Name of Er	mployer			Is this contribution associa	ated with	a x	Yes	
Insurance Broker		Kerin Ag	ency			fundraising event listed in  If yes, list Event # 072	Section 3 212009	11?	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	I '─	child of a lob	,		\$1	100.00	\$100.00
government the contract is with:	First Name	LACCULIVE	Legislative	МІ		contribution:	<u> </u>		TD //	
Harper-Farkas	Jennifer			IVII	Cash	Personal C	heck	Contribution 1274	on ID#	Amount of Contribution
		1			Money	y Order X Credit/Deb	oit Card			
Residential Street Address		City			State UT	Zip Code		ate Received	,	
1119 Tee Time Dr		Farmingt			01	84025-2919  Is this contribution associa	_			
Principal Occupation at home mom		Name of Er	mployer			fundraising event listed in		I1?	Yes	
						If yes, list Event # 072	212009	<u>A</u> L	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributio	on ID #	Amount of
Malloy	Ronald				Cash	Personal C  V Order  X Credit/Del		1273		Contribution
D 11 6160 (A11		G:			-			ate Received		
Residential Street Address 111 Downs Ave		City Stamford	ı		State CT	Zip Code 06902-7802		7/21/2009	e	
Principal Occupation		Name of Er	mplover		-	Is this contribution associa	ated with	a <b>x</b>	Yes	
software		Kodak				fundraising event listed in  If yes, list Event # 072		11?	No	
							<u> </u>	<u> </u>	-	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	gate Contribu	tions 100.00	¢200.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	No		\$4	100.00	\$200.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Lasko	William			J	Cash Money	Personal C  y Order X Credit/Det		1272		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
40 Four Brooks Rd		Stamford			СТ	06903-4615	0	7/21/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associa fundraising event listed in		1^	Yes	
attorney		NYC				If yes, list Event # 072			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		P		1 ~	child of a lob	•		\$3	375.00	\$75.00
government the contract is with:		Executive	Legislative	<u> Т                                   </u>	es	INO				

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Orig	ginal 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Gebrian	First Name Jeffrey		MI A	Cash	contribution:    X   Personal Cl	heck 13	ontribution ID #	Amount of Contribution
Residential Street Address 56 Sunrise Hill Dr		City West Hartford		State CT	Zip Code 06107-3350		Received 2/2009	
Principal Occupation  Landscape Architect		Name of Employer Cr 3 Inc./Landscaping & Arc	hitect	•	Is this contribution associa fundraising event listed in If yes, list Event # 072		X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$375.00	\$125.00
Last Name Gertzoff	First Name Arline		MI P	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 13	ontribution ID #	Amount of Contribution
Residential Street Address 6 Fillow St		City Westport		State CT	Zip Code 06880-1217		Received 2/2009	
Principal Occupation education		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (	Contributions \$20.00	\$20.00
Last Name McAnaney	First Name Brian		MI T	Cash	contribution:    X   Personal Cl	heck 12	ontribution ID #	Amount of Contribution
Residential Street Address 12 Georgian Ct		City Stamford		State CT	Zip Code 06903-4035		Received 2/2009	
Principal Occupation attorney		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$150.00	\$150.00
Last Name Bonom	First Name Sandra		MI F	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 13	ontribution ID#	Amount of Contribution
Residential Street Address 3 Dora St		City Stamford		State CT	Zip Code 06902-5414		Received 2/2009	
Principal Occupation dog groomer		Name of Employer Pet Smart			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$50.00	\$25.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						C	Origina	1 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		•		
Last Name Strateman	First Name Howard		MI J	Cash	contribution:    X   Personal C	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 148 Ocean Dr W		City Stamford		State CT	Zip Code 06902-8028		e Received /22/2009		
Principal Occupation investment banker		Name of Employer Harbour Associates LLC			Is this contribution associa fundraising event listed in If yes, list Event # 072		1 1		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution \$100	1	\$50.00
Last Name Reed	First Name Benjamin		MI R	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 38 Bertmor Dr		City Stamford		State CT	Zip Code 06905-2114	1	e Received /22/2009		
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	1 1	1	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contribution	1	\$50.00
Last Name Nichani	First Name Shalinder		MI	Cash	contribution: Personal Contribution:  y Order  X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address  12 Hickory Dr # B		City Greenwich		State CT	Zip Code 06831-4916		e Received /22/2009		
Principal Occupation Business		Name of Employer Greenwich Hospitality Group	o,llc		Is this contribution associal fundraising event listed in If yes, list Event # 072	Section J1?	1 1 .	1	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution \$350	1	\$100.00
Last Name Vitti	First Name Antonio		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 65 Dulan Dr		City Stamford		State CT	Zip Code 06903-1631		e Received /22/2009		
Principal Occupation excavator		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	1 1		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyist child of a lob	byist?	Aggrega	ate Contribution \$150	1	\$150.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contribu	ıtions froi	n Individu	ıals		•	
Last Name Vitti	First Name Stefania		MI M	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1292	tion ID#	Amount of Contribution
Residential Street Address 65 Dulan Dr		City Stamford		State CT	Zip Code 06903-1631	Date Receive 07/22/20		
Principal Occupation administration		Name of Employer  A. Vitti Excavators			Is this contribution association fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$150.00	\$150.00
Last Name Colatrella	First Name Lynne		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1297	tion ID#	Amount of Contribution
Residential Street Address 302 Vine Rd		City Stamford		State CT	Zip Code 06905-2107	Date Receive 07/22/20		
Principal Occupation VP		Name of Employer DSSD		•	Is this contribution association fundraising event listed in If yes, list Event # 072	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$75.00	\$50.00
Last Name Heaphy	First Name Eileen		MI M	Cash	contribution:  Personal C y Order X Credit/Deb	heck 1328	tion ID#	Amount of Contribution
Residential Street Address 247 Hamilton Ave Apt 4		City Stamford		State CT	Zip Code 06902-3484	Date Receive		
Principal Occupation retired		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$150.00	\$25.00
Last Name Savage	First Name Mary		MI M	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1308	tion ID#	Amount of Contribution
Residential Street Address 14 Lillian St		City Stamford		State CT	Zip Code 06902-4212	Date Receive 07/22/20		
Principal Occupation Elementary School Principal		Name of Employer Stamford Board of Educati	on	•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$300.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
White	Arthur			Н	Cash Money	y Order X Personal	Check ebit Card	1304		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
121 Four Brooks Rd		Stamford			СТ	06903-4629	c	7/22/2009	9	
Principal Occupation n/a		Name of Er self	nployer		•	Is this contribution associated If yes, list Event # 0		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	ntions 125.00	\$50.00
Last Name	First Name			MI		contribution:		Contributio	on ID #	
Cohen	Benjamin				Cash	x Personal	Check ebit Card	1286	JII ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
491 Thayer Pond Rd		Wilton			СТ	06897-2321	C	7/22/2009	9	
Principal Occupation		Name of Er	nployer			Is this contribution asso fundraising event listed		1^	Yes	
Student		None				If yes, list Event # 0			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$3	ntions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Hynes	Thomas				Cash Money	y Order	Check ebit Card	1318		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
67 Fawnfield Rd		Stamford			СТ	06903-3727	C	07/22/2009		
Principal Occupation  wealth management		Name of Er Hynes, F	nployer Himmelreich, Glenno	n & Co.		Is this contribution assortiundraising event listed  If yes, list Event # 0	in Section	J1?	Yes No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	st. spouse. or	Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	dependent	child of a lob	byist?	71881	-	350.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	on ID #	Amount of
Hynes	Eileen			Р	Cash Money	y Order X Personal Credit/D	Check ebit Card	1319		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
67 Fawnfield Rd		Stamford			СТ	06903-3727	С	07/22/2009	9	
Principal Occupation  Director		Name of Er Grace J.	<sup>nployer</sup> Fippinger Foundatio	n		Is this contribution assortiundraising event listed If yes, list Event # 0	in Section	J1?	Yes No	
Is contributor a principal of a state contractor state contractor?	or prospective	<u> </u>	Yes X No		utor a lobbyis		Aggre	egate Contribu		#100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res X	No		\$	350.00	\$100.00

		I. MON	ETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemize	ed Contribution	ons from	Individu	ıals				
Last Name Argenio	First Name Eileen			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 1342	on ID #	Amount of Contribution
Residential Street Address 76 Palmer St		City Stamford			State CT	Zip Code 06907-2034		7/22/2009		
Principal Occupation none		Name of Employer none				Is this contribution association fundraising event listed in If yes, list Event # 07		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	ntions	\$50.00
Last Name Sherwood	First Name Jami			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 1295	on ID#	Amount of Contribution
Residential Street Address 48 Putter Dr		City Stamford			State CT	Zip Code 06907-1238		ate Received 7/22/2009	9	
Principal Occupation graphic designer		Name of Employer self			•	Is this contribution associfundraising event listed in If yes, list Event # 07	n Section J	1? L	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions \$75.00	\$50.00
Last Name McCluskey	First Name David			MI	Cash	contribution:    X   Personal 0		Contribution 1324	on ID#	Amount of Contribution
Residential Street Address 43 Elmhurst Cir		City West Hartford			State CT	Zip Code 06110-1412		ate Received		
Principal Occupation staff rep.		Name of Employer CT State Emp				Is this contribution association fundraising event listed in If yes, list Event # 07	n Section J	1? L	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu \$3	ations 375.00	\$175.00
Last Name Kelley	First Name James			MI E	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 1279	on ID#	Amount of Contribution
Residential Street Address 26 Coopers Pond Rd		City Stamford			State CT	Zip Code 06905-3008		ate Received 7/22/2009		
Principal Occupation firefighter		Name of Employer City of Stamfo			•	Is this contribution association fundraising event listed in If yes, list Event # 07	n Section J	1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions	\$100.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	TT)								Origina	al 10/13/2009
		B. It	emized Contributi	ons fron	Individu	ıals		'		
Last Name Malloy Creanza	First Name Alison			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution	ı ID#	Amount of Contribution
Residential Street Address 89 Mitchell St		City Stamford	i		State CT	Zip Code 06902-7832	1	Date Received 07/22/2009		
Principal Occupation Principal		Name of E	mployer a Solutions			Is this contribution associ- fundraising event listed in If yes, list Event # 072	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$37	ions 75.00	\$25.00
Last Name Pozzi	First Name Paul			MI E	X Cash	contribution: Personal C		Contribution	n ID#	Amount of Contribution
Residential Street Address 15 Shepard Hill Rd		City Hamden			State CT	Zip Code 06514-1633		Date Received		
Principal Occupation architect		Name of E	mployer		•	Is this contribution associ- fundraising event listed in If yes, list Event # 077		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$20	ions 00.00	\$100.00
Last Name Pozzi	First Name Paul			MI J	x Cash	contribution: Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address 537 Emerson Dr		City Branford			State CT	Zip Code 06405-5809	1	Date Received		
Principal Occupation architect		Name of E	mployer			Is this contribution associ- fundraising event listed in If yes, list Event # 072	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$20	ions 00.00	\$100.00
Last Name Lutka	First Name Madonna			MI L	Cash	contribution:    X   Personal C		Contribution	n ID#	Amount of Contribution
Residential Street Address 202 Essex Ct		City Torringto	on		State CT	Zip Code 06790-2800	1	Date Received 07/22/2009		
Principal Occupation Nurse		Name of E				Is this contribution associ fundraising event listed in If yes, list Event # 072	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$20	ions 00.00	\$100.00

		I. MON	ETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemiz	zed Contributi	ons from	Individu	ıals		<u> </u>		
Last Name Malloy	First Name Sandra			MI C	Cash	contribution:    X   Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address 16 Stamford Ave		City Stamford			State CT	Zip Code 06902-8014		Pate Received 17/22/2009		
Principal Occupation  Volunteer Director		Name of Employe Waveny Care				Is this contribution association fundraising event listed in If yes, list Event # 072	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Malloy	First Name Patricia			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution	ı ID#	Amount of Contribution
Residential Street Address 96 Verplank Ave		City Stamford			State CT	Zip Code 06902-8237		Pate Received 07/22/2009		
Principal Occupation Teacher		Name of Employe Board of Edu			-	Is this contribution association fundraising event listed in If yes, list Event # 073			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$5	ions 50.00	\$50.00
Last Name Fife	First Name Lynne			MI C	Cash	contribution:  X Personal C  Order Credit/Det		Contribution	ı ID#	Amount of Contribution
Residential Street Address 102 Strawberry Hill Ave Apt 3		City Stamford			State CT	Zip Code 06902-2566		Pate Received 17/22/2009		
Principal Occupation Asst. Registrar of Voters		Name of Employe City of Stamf				Is this contribution association fundraising event listed in If yes, list Event # 072	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$37	ions 75.00	\$75.00
Last Name Barbarotta	First Name Sharon			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution 1293	ı ID#	Amount of Contribution
Residential Street Address 28 Unity Dr		City Trumbull			State CT	Zip Code 06611-4929		Pate Received 17/22/2009		
Principal Occupation invitations business		Name of Employo				Is this contribution association fundraising event listed in If yes, list Event # 073	Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	DUE DATE	
Dan Malloy For Connecticut (C	T)							Origina	al 10/13/2009	
		B. Itemized Contributi	ons fron	Individu	ıals					
Last Name	First Name		MI	Method of	contribution:		Contribution	ı ID#	Amount of	
Fox	Gerald		М	Cash Money	y Order		1320		Contribution	
Residential Street Address		City		State	Zip Code	Dat	te Received			
66 Fairview Ave		Stamford		СТ	06902-8129	07	/22/2009			
Principal Occupation Attorney		Name of Employer Fox & Fox, LLP			Is this contribution associa fundraising event listed in If yes, list Event # 072		? ഥ □	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob yes	byist?	Aggreg	ate Contributi \$17	ions 75.00	\$175.00	
Last Name	First Name		MI		contribution:		Contribution	ı ID#	Amount of	
Kane	Ann	<b>,</b>	С	Cash Money	y Order Personal Cl Credit/Debi		1300		Contribution	
Residential Street Address 183 Stamford Ave		City Stamford		State CT	Zip Code 06902-8013		te Received			
Principal Occupation		Name of Employer			Is this contribution associa		1^1	Yes		
library		Cummings & Lockwood			fundraising event listed in I If yes, list Event # 072			No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributi \$20	ions 00.00	\$100.00	
government the contract is with:  Last Name	First Name		I MI		contribution:	1	Contribution	NID#		
Osta	Nagi		М	Cash	X Personal Cl y Order Credit/Debi		1285	1 ID #	Amount of Contribution	
Residential Street Address 90 W Bank Ln		City Stamford		State CT	Zip Code 06902-1309		te Received			
Principal Occupation		Name of Employer			Is this contribution associa			Yes		
President		Exchange Corp. Inc.			fundraising event listed in If yes, list Event # 072		? <u> </u>			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	ate Contributi \$25	ions 50.00	\$100.00	
Last Name	First Name		MI	1	contribution:		Contribution	ı ID#	Amount of	
Ancker	Walter		J	Cash Money	y Order X Personal Cl Credit/Deb		1281		Contribution	
Residential Street Address		City		State	Zip Code		te Received			
34 Old Rock Ln		Norwalk		СТ	06850-2231		/22/2009			
Principal Occupation gasoline retailer		Name of Employer Bald Eagle Inc.			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1	? ഥ □	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributi \$20	ions 00.00	\$100.00	

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Ancker	Walter			J	Cash Money	y Order X Personal Credit/D		1282		Contribution
Residential Street Address		City		•	State	Zip Code	Е	Date Received		
34 Old Rock Ln		Norwalk			СТ	06850-2231	c	7/22/2009	9	
Principal Occupation		Name of Er	nployer		•	Is this contribution associated		1^	Yes	
gasoline retailer		Bald Eag	le Inc.			fundraising event listed  If yes, list Event # 02	7212009		No	
Is contributor a principal of a state contractor of state contractor?	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I	res x	•		\$2	200.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Ahuja	Ravi				Cash Money	x Personal y Order Credit/D	Check ebit Card	1283		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
296 Westover Rd		Stamford			СТ	06902-1928	c	7/22/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ		1^	Yes	
Architect		AWA Des	sign Group, PC			fundraising event listed  If yes, list Event # 02			No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis	byist?	Aggre	egate Contribu \$1	itions	\$100.00
government the contract is with:		Executive	Legislative	L Y	res x	No				
Last Name	First Name			MI		contribution:	Check	Contribution	on ID #	Amount of
Rosenblum	James	,			Cash Money	y Order Credit/D		1314		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
48 Spring St		Greenwic	:h		СТ	06830-6176	C	07/22/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution association fundraising event listed		а <b>х</b>	Yes	
Attorney		self				If yes, list Event # 07			No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		<b>.</b>		I	child of a lob	•		\$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	1		<u> </u>	1		
Last Name Tuckel	First Name Elliott			MI	Method of Cash	contribution:	Check	Contributio	on ID #	Amount of Contribution
rucker	Lillott	,			_	y Order Credit/D		1315		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
339 Stamford Ave		Stamford			СТ	06902-8203	C	)7/22/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associated fundraising event listed		1^	Yes	
retired		n/a				If yes, list Event # 03			No	
Is contributor a principal of a state contractor of	or prospective	-	Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		Emany!	Legislative	dependent	child of a lob	-		\$	\$54.00	\$54.00
government the contract is with:	ᆜ	Executive	Legislative	Т П,	CS	INO				

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FIL	ING DUE DATE
Dan Malloy For Connecticut (C	T)						Ori	ginal 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Pouzik	First Name Ksenia		MI M	Cash	contribution:    X   Personal Cl	heck 1	Contribution ID #	Amount of Contribution
Residential Street Address 27 Crane Rd N		City Stamford		State CT	Zip Code 06902-2504		Received 22/2009	
Principal Occupation accountant		Name of Employer Trans-Lux Corporation			Is this contribution associa fundraising event listed in If yes, list Event # 072		X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$54.0	0 \$54.00
Last Name Esposito	First Name Marilyn		MI N	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1	Contribution ID #	Amount of Contribution
Residential Street Address  1 Strawberry Hill Ct Apt 7H		City Stamford		State CT	Zip Code 06902-2530		Received 22/2009	
Principal Occupation owner, marketing/PR		Name of Employer MCC Worldwide			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$100.0	\$100.00
Last Name Vasudevan	First Name Ashok		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 1	Contribution ID #	Amount of Contribution
Residential Street Address 9 W Broad St Fl 5		City Stamford		State CT	Zip Code 06902-3734		Received 22/2009	
Principal Occupation business		Name of Employer Preferred Brands		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$125.0	0 \$125.00
Last Name Phillips	First Name Anne		MI P	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 1	Contribution ID #	Amount of Contribution
Residential Street Address 3300 Park Ave Unit 5		City Bridgeport		State CT	Zip Code 06604-1140		Received 22/2009	
Principal Occupation Attorney		Name of Employer City Of Bridgeport		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$375.0	\$375.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING I											
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009			
		B. Itemized Contribut	ions fron	Individu	ıals		•				
Last Name Mohadjer	First Name Nina		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 1332	tion ID#	Amount of Contribution			
Residential Street Address 20 Rustic Rd		City Ridgefield		State CT	Zip Code 06877	Date Receive 07/22/20					
Principal Occupation lawyer		Name of Employer Eckert Seaman			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	s30.00	\$30.00			
Last Name Rogers	First Name P. Buffy		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	neck 1344	tion ID#	Amount of Contribution			
Residential Street Address 15 William St		City Pawcatuck		State CT	Zip Code 06379-2110	Date Receive 07/22/20					
Principal Occupation  caretaker		Name of Employer disabled		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$10.00	\$10.00			
Last Name Schwartz	First Name Arnold		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	neck 1346	tion ID#	Amount of Contribution			
Residential Street Address 111 Barnes Rd		City Stamford		State CT	Zip Code 06902-1242	Date Receive 07/22/20					
Principal Occupation retired		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$150.00	\$150.00			
Last Name Clemente	First Name Esther		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	neck 1347	tion ID#	Amount of Contribution			
Residential Street Address 42 Matilda Ln		City Shelton		State CT	Zip Code 06484-3657	Date Receive 07/22/20					
Principal Occupation  cook - mgm.		Name of Employer Sodexho		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions \$20.00	\$20.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING E											
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009			
		B. Itemized Contribut	ions fron	Individu	ıals		•				
Last Name Esserman	First Name Dean		MI	Cash	contribution:    X   Personal C	heck 13	ntribution ID#	Amount of Contribution			
Residential Street Address 60 President Ave		City Providence		State RI	Zip Code 02906-4216	Date Re 07/22	eceived 2/2009				
Principal Occupation City of Providence, RI		Name of Employer Police Chief			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$50.00			
Last Name Christ	First Name Michael		MI	Cash	contribution:  X Personal Conder Credit/Deb	heck 13	ntribution ID#	Amount of Contribution			
Residential Street Address 66 Temple Dr		City East Hartford		State CT	Zip Code 06108-1330	Date Re 07/22	eceived 2/2009				
Principal Occupation Attorney		Name of Employer State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$150.00	\$100.00			
Last Name Feighan	First Name Michael		MI P	Cash	contribution:    X   Personal C	heck 12	ntribution ID #	Amount of Contribution			
Residential Street Address 43 Seaview Ave Apt 9		City Stamford		State CT	Zip Code 06902-6028	Date Re	eceived 2/2009				
Principal Occupation Sales		Name of Employer Alpha EMC			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$50.00	\$50.00			
Last Name Hewitt	First Name Peter		MI	Cash	contribution:  X Personal City Order Credit/Deb	heck 12	ntribution ID#	Amount of Contribution			
Residential Street Address 8 Bryon Rd		City Old Greenwich		State CT	Zip Code 06870-2101	Date Re 07/22	eceived 2/2009				
Principal Occupation lawyer		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate C	Contributions \$100.00	\$100.00			

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						О	Origina	1 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		•		
Last Name Ray	First Name Sumana		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 15 Robin St Fl 2	•	City Stamford	•	State CT	Zip Code 06902-6226		e Received /22/2009		
Principal Occupation  consultant - hospitality		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event # 072		X Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$50		\$50.00
Last Name Malloy	First Name Brien		MI E	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 20 Ralsey Rd S		City Stamford		State CT	Zip Code 06902-7812		e Received /22/2009		
Principal Occupation  construction		Name of Employer Turner Construction Co.			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$375		\$375.00
Last Name Caravella	First Name Louis		MI C	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 96 Orchard St		City Cos Cob		State CT	Zip Code 06807-2009		e Received /22/2009		
Principal Occupation tax collector		Name of Employer Town of Greenwich			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	1 1		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$100		\$100.00
Last Name Horton	First Name Carl		MI T	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 1984 Park Ave		City Bridgeport		State CT	Zip Code 06604-1925		e Received /22/2009		
Principal Occupation marketing		Name of Employer duBay Horton and Associate	S	•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	1 1		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$100		\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Ite	emized Contributi	ons fron	ı Individu	ıals		<u> </u>		
Last Name Malloy	First Name Kevin			MI	x Cash	contribution:  Personal C y Order Credit/Del		Contribution 1296	ID#	Amount of Contribution
Residential Street Address 202 Soundview Ave Apt 35		City Stamford			State CT	Zip Code 06902-7038		Date Received 07/22/2009		
Principal Occupation  Real Estate Agent		Name of En	nployer			Is this contribution associ- fundraising event listed in If yes, list Event # 072	Section .			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributio	ons 25.00	\$25.00
Last Name Malloy	First Name Kathryn			MI M	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 1317	ID#	Amount of Contribution
Residential Street Address 202 Soundview Ave Apt 35		City Stamford			State CT	Zip Code 06902-7038		Date Received		
Principal Occupation teacher		Name of En Holy Spir	nployer rit School		-	Is this contribution associ- fundraising event listed in If yes, list Event # 072				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributio	ons 75.00	\$75.00
Last Name Payne	First Name Donna			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 1298	ID#	Amount of Contribution
Residential Street Address 216 W Hill Rd		City Stamford			State CT	Zip Code 06902-1712		Date Received 07/22/2009		
Principal Occupation  consultant		Name of En	nployer			Is this contribution associ- fundraising event listed in If yes, list Event # 072	Section .		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributio	ons 00.00	\$200.00
Last Name Drew	First Name Teresa			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 1299	ID#	Amount of Contribution
Residential Street Address 24 Tremont Ave		City Stamford			State CT	Zip Code 06906-2329		Date Received		
Principal Occupation Director - Youth Services		Name of En				Is this contribution associfundraising event listed in If yes, list Event # 073	Section .			L
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contributio	ons 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contributi	ons fron	Individu	ials		•			
Last Name Fox	First Name Bridget		MI F	Cash	contribution:    X   Personal Cl	heck 13	ntribution ID #	Amount of Contribution		
Residential Street Address 287 Hamilton Ave Apt 2H		City Stamford		State CT	Zip Code 06902-3539	Date Re	eceived 2/2009			
Principal Occupation School Readiness Liaison		Name of Employer City of Stamford			Is this contribution associa fundraising event listed in If yes, list Event # 072		X Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$54.00	\$54.00		
Last Name Fox	First Name Daniel		MI J	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 13	ntribution ID#	Amount of Contribution		
Residential Street Address 287 Hamilton Ave Apt 2H		City Stamford		State CT	Zip Code 06902-3539	Date Re 07/22	eceived 2/2009			
Principal Occupation attorney		Name of Employer  Curtis Brinckerhoff and Barne	ett		Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$54.00	\$54.00		
Last Name Gold	First Name Ronald		MI M	Cash	contribution:    X   Personal Cl	heck 13	ntribution ID #	Amount of Contribution		
Residential Street Address 6 Ocean Dr N		City Stamford		State CT	Zip Code 06902-7838	Date Re	eceived 2/2009			
Principal Occupation attorney		Name of Employer Benjamin & Gold, PC			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$100.00	\$100.00		
Last Name Warrick	First Name William		MI W	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 13	ntribution ID #	Amount of Contribution		
Residential Street Address 242 Ocean Dr E		City Stamford		State CT	Zip Code 06902-8238	Date Re 07/22	eceived 2/2009			
Principal Occupation retired		Name of Employer n/a			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate C	Contributions \$375.00	\$375.00		

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Ite	emized Contributi	ons from	ı Individu	ıals		'		
Last Name Geary	First Name Thomas			MI J	Cash	contribution:  X Personal C y Order Credit/Det		Contribution	n ID#	Amount of Contribution
Residential Street Address 28 Blue Mountain Rd		City Norwalk			State CT	Zip Code 06851-2218		Oate Received 07/22/2009		
Principal Occupation none listed		Name of En Accent Pi	nployer icture Frame			Is this contribution association fundraising event listed in If yes, list Event # 072	Section .	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut	ions 75.00	\$375.00
Last Name Franklin	First Name Jeanne			MI W	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 5 Davis Ln		City Westport			State CT	Zip Code 06880-4115		Date Received		
Principal Occupation  Executive Director		Name of Em Stamford	nployer I Senior Center, Inc.			Is this contribution association fundraising event listed in  If yes, list Event # 072	Section .	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut	ions 00.00	\$100.00
Last Name Andre	First Name Marc			MI G	Cash	contribution:  X Personal C y Order Credit/Det		Contribution	n ID#	Amount of Contribution
Residential Street Address 130 Lakeview Dr		City Fairfield			State CT	Zip Code 06825-2523		Pate Received		
Principal Occupation architect/real estate investor		Name of En	nployer			Is this contribution association fundraising event listed in If yes, list Event # 072	Section .	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$!	ions 54.00	\$54.00
Last Name Mount	First Name Michele			MI C	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 51 Jockey Hollow Rd		City Monroe			State CT	Zip Code 06468-1203		Date Received		
Principal Occupation attorney		Name of En City of B	nployer ridgeport		•	Is this contribution association fundraising event listed in If yes, list Event # 072	Section .	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut	ions 50.00	\$50.00

		I. MONETARY	RECE	EIPTS	(Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemized Contr	ibutions	s from	Individu	als				
Last Name	First Name		М	ſI	Method of o	contribution:		Contributio	on ID #	Amount of
Heinze	Scott		С		Cash Money	Personal C  V Order  X Credit/Deb		1333		Contribution
Residential Street Address		City	•		State	Zip Code		ate Received		
26 Vani Ct		Westport			СТ	06880-6038	0	7/23/2009	9	
Principal Occupation  Paramedic		Name of Employer  New York City Fire Depart	artment			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X M			tor a lobbyist	byist?	Aggre	gate Contribu	stions \$5.00	\$5.00
Last Name Barndollar	First Name Livia		М	1I	Method of o	contribution: Personal C  Order X Credit/Deb		Contribution 1334	on ID#	Amount of Contribution
Residential Street Address 69 Housatonic Dr		City Milford	•		State CT	Zip Code 06460-5033		ate Received	)	
Principal Occupation Attorney		Name of Employer Marvin, Ferro, Barndolla Roberts,LLC	ar &			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X			tor a lobbyist	byist?	Aggre	gate Contribu \$1	tions	\$100.00
Last Name Lewis-Grace	First Name Sharon		М	11	Method of o	contribution: Personal C  Order X Credit/Deb		Contribution 1335	on ID #	Amount of Contribution
Residential Street Address 573 Nod Hill Rd	•	City Wilton	•		State CT	Zip Code 06897-1302		ate Received 7/23/2009	9	
Principal Occupation none		Name of Employer none		•		Is this contribution associa fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X			ttor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	stions 550.00	\$50.00
Last Name MacDonald	First Name Bruce		M T		Method of o	contribution: Personal C  Order X Credit/Deb		Contribution 1336	on ID#	Amount of Contribution
Residential Street Address 26 Stanton St		City Pawcatuck			State CT	Zip Code 06379-1842		ate Received 7/24/2009		
Principal Occupation public relations consultant		Name of Employer self		•		Is this contribution association fundraising event listed in If yes, list Event # 092		1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X			tor a lobbyist	byist?	Aggre	gate Contribu	itions \$25.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING I											
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009			
		B. Itemized Contribut	ions fron	ı Individu	ıals						
Last Name Yantorno	First Name Barbara		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 13	ntribution ID#	Amount of Contribution			
Residential Street Address 86 Middlesex Rd		City Darien		State CT	Zip Code 06820-3722	Date Re 07/24	eceived 1/2009				
Principal Occupation social worker		Name of Employer City of stamford			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00			
Last Name Yantorno	First Name Michael		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 13	ntribution ID #	Amount of Contribution			
Residential Street Address 86 Middlesex Rd		City Darien		State CT	Zip Code 06820-3722	Date Re 07/24	eceived 1/2009				
Principal Occupation  Computer Tech		Name of Employer City of Stamford			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00			
Last Name Savage	First Name Frank		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 13	ntribution ID #	Amount of Contribution			
Residential Street Address 500 Bedford St Apt 308		City Stamford		State CT	Zip Code 06901-1509	Date Re	eceived 7/2009				
Principal Occupation  consultant		Name of Employer Savage Holdings LLC		•	Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	X Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$150.00	\$150.00			
Last Name Chirico	First Name Anthony		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 13	ntribution ID#	Amount of Contribution			
Residential Street Address 128 River Rd		City Essex		State CT	Zip Code 06426-1306	Date Re 07/27	eceived 7/2009				
Principal Occupation  Marketing		Name of Employer Accel		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$375.00	\$375.00			

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						С	Origina	nl 10/13/2009
		B. Itemized Contribu	tions fron	ı Individu	ıals				
Last Name Eckert	First Name Charmage	ne	MI	Cash	contribution:	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 128 River Rd		City Essex		State CT	y Order x Credit/Deb Zip Code 06426-1306	Date	e Received /27/2009		
Principal Occupation Writer		Name of Employer Independant		1	Is this contribution associa fundraising event listed in If yes, list Event #			res No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$375		\$375.00
Last Name Mills	First Name Jamie		MI L	Cash	contribution:  Personal Contribution:  y Order  X Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 1678 Randolph Rd		City Middletown		State CT	Zip Code 06457-4043		e Received 28/2009		
Principal Occupation Attorney		Name of Employer Self-Employed		•	Is this contribution associa fundraising event listed in If yes, list Event #		X N	es Io	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$375		\$375.00
Last Name Fitzpatrick	First Name William		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 61 Pleasant St		City Waterbury	•	State CT	Zip Code 06706-1326		e Received /28/2009		
Principal Occupation Owner		Name of Employer Ultimate Concrete			Is this contribution associa fundraising event listed in If yes, list Event #			es No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$375		\$225.00
Last Name Zagaja	First Name Matthew		MI J	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 12 Cornish Rd		City Wethersfield		State CT	Zip Code 06109-1415		e Received 28/2009		
Principal Occupation student		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		X N	es Io	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$5	ns 5.00	\$5.00

		I. MONETARY	RECE	IPTS	(Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemized Contr	ibutions	from	Individu	ials				
Last Name	First Name		MI	I	Method of o	contribution:		Contributi	on ID#	Amount of
Webb	Peggy				Cash Money	V Order X Personal C		1355		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
64 Woodbury HI		Woodbury			СТ	06798-2963	0	8/05/200	9	
Principal Occupation retired		Name of Employer retired				Is this contribution associ- fundraising event listed in If yes, list Event # 073		<sub>J1?</sub>	Yes	
							T		_	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X			tor a lobbyist child of a lob es	byist?	Aggre	egate Contribu \$3	150.00	\$100.00
Last Name	First Name		MI	I	Method of o	contribution:		Contributi	on ID #	Amount of
Kim	Eric				Cash Money	Order Personal C		1351		Contribution
Residential Street Address  39 Maple Tree Ave Unit 6		City Stamford			State CT	Zip Code 06906-2271	1	ate Received		
Principal Occupation		Name of Employer		!		Is this contribution associ			Yes	
Repo Margin Manager		UBS Investment Bank				fundraising event listed in  If yes, list Event # 072		J1?	No No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X			tor a lobbyist	-	Aggre	egate Contribu	itions	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		Ye	es X	No		Ψ.	100.00	\$100.00
Last Name	First Name		MI			contribution:		Contributi	on ID#	Amount of
Stewart	Frank		G		Cash Money	Order Personal C		1352		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
1061 Matianuck Ave		Windsor			СТ	06095-3209		8/05/200	9	
Principal Occupation  Retired		Name of Employer Educator				Is this contribution associ- fundraising event listed in		<sub>11?</sub>	_ 100	
Retired			_			If yes, list Event #		LX	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X			tor a lobbyist		Aggre	egate Contribu	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	dej	Ye		•		9	\$25.00	\$25.00
Last Name	First Name		MI	I	Method of o	contribution:	<u> </u>	Contributi	on ID #	Amount of
Heinrich	Deborah				Cash Money	V Order X Personal C		1353		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11 Beaver Pond Rd		Madison			СТ	06443-2328	0	8/05/200	9	
Principal Occupation		Name of Employer	combly			Is this contribution associ- fundraising event listed in		J1?	Yes	
State Representative		Connecticut General As	sembly			If yes, list Event #		X	No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	Yes X			tor a lobbyist	byist?	Aggre	egate Contribu	itions 375.00	\$375.00
government the contract is with:		Executive Legislative		Ye	es X	No	1	·		1

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						О	rigina	1 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Heinrich	First Name Russell		MI	Cash	contribution:    X   Personal C y Order		Contribution II	D#	Amount of Contribution
Residential Street Address 11 Beaver Pond Rd		City Madison		State CT	Zip Code 06443-2328		ate Received 8/05/2009		
Principal Occupation engineer		Name of Employer Covidien		•	Is this contribution association fundraising event listed in If yes, list Event #				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribution \$375		\$375.00
Last Name Leandro	First Name Eduardo		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 41 Deer Ridge Rd		City Stonington		State CT	Zip Code 06378-1915		ate Received 8/05/2009		
Principal Occupation lineman		Name of Employer Metro Cast of CT		•	Is this contribution associa fundraising event listed in If yes, list Event #				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribution \$20		\$20.00
Last Name Kinol	First Name Ramon		MI G	Cash	contribution:    X   Personal C		Contribution II	D#	Amount of Contribution
Residential Street Address 21 Orr Hatch		City Cornwall		State NY	Zip Code 12518-1727		ate Received 8/05/2009		
Principal Occupation  Developer		Name of Employer Self Employed		•	Is this contribution association fundraising event listed in If yes, list Event #				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribution \$375		\$375.00
Last Name DiBlasio	First Name Robyn		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 4 Silwen Ln		City Norwalk		State CT	Zip Code 06851-3137		ate Received 8/13/2009		
Principal Occupation account manager - sales		Name of Employer Novus LLC			Is this contribution association fundraising event listed in If yes, list Event # 072	Section J			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribution \$100		\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Gordon	A. Reynol	ds			Cash Money	y Order X Personal Credit/De		1359		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
28 Delaware Rd		Easton			СТ	06612-2106	0	8/14/2009	9	
Principal Occupation attorney		Name of En	nployer			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu \$1	itions .00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Rothenberg	Robert				Cash Money	x Personal y Order Credit/De		1360	,	Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
3119 Miro Dr S		Palm Bea	nch Gardens		FL	33410-1285	0	8/14/2009	9	
Principal Occupation		Name of Er	mployer		•	Is this contribution assoc			Yes	
Retired		None				fundraising event listed i If yes, list Event #	n Section .	x	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	bbyist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Castoldi	Douglas				Cash Money	y Order X Personal Credit/De		1361		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
90 Lexington Ave # 11C		New York	<		NY	10016	0	8/14/2009	)	
Principal Occupation		Name of Er				Is this contribution assoc fundraising event listed i			Yes	
engineer		DKS Con	nstruction			If yes, list Event #	occuon	x	No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu \$3	tions 375.00	\$375.00
government the contract is with:  Last Name	First Name			MI	I	contribution:		0 17 6	ID //	
Casolo	Louis			A	Cash	y Order Resonal  Credit/De		Contribution 1362	on ID#	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	Е	ate Received		
26 Hassake Rd		Old Gree	nwich		СТ	06870-1328	0	8/14/2009	9	
Principal Occupation		Name of En	mployer		•	Is this contribution assoc			Yes	
engineer		cos				fundraising event listed i If yes, list Event #	n Section .	x x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$1	.00.00	\$100.00
government the contract is with:					·	•				l .

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Dan Malloy For Connecticut (C	T)							Origina	al 10/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contribution	n ID#	Amount of
Monto	Jennifer			Cash Money	y Order X Personal Cl		1363		Contribution
Residential Street Address		City		State	Zip Code	- 1	ate Received		
8 Frog Aly		Chilmark		MA	02535-2133	08	8/14/2009	1	
Principal Occupation manager		Name of Employer  Nantucket Cottage Hospital			Is this contribution associa fundraising event listed in		1? <b>브</b>		
managei			_		If yes, list Event #		X	No	•
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribut \$3°	tions 75.00	\$375.00
government the contract is with:		Executive Legislative	+-	res X			1		
Last Name Monto	First Name Raymond		MI	Method of Cash	contribution:  X Personal Cl	neck	Contribution	n ID#	Amount of Contribution
		Г		Money	y Order Credit/Debi	it Card	1304		
Residential Street Address  8 Frog Aly		City Chilmark		State MA	Zip Code 02535-2133	- 1	ate Received 8/14/2009		
Principal Occupation		Name of Employer			Is this contribution associa	ted with a	a	Yes	
MD		Nantucket Hospital			fundraising event listed in If yes, list Event #	Section J	1? x	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis	-	Aggreg	gate Contribut	tions	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		es x	•		\$3	75.00	\$375.00
Last Name	First Name		MI	Method of	contribution:		Contribution	n ID#	Amount of
Goichman	Jennifer			Cash Money	y Order X Personal Cl Credit/Debi		1365		Contribution
Residential Street Address		City		State	Zip Code	Da	ate Received		
33 Meadow Wood Dr		Greenwich		СТ	06830-7023	30	8/14/2009	-	
Principal Occupation		Name of Employer SCG Capital			Is this contribution associa fundraising event listed in		1? L	100	
owner		See capital			If yes, list Event #		X	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis child of a lob	-	Aggreg	gate Contribut		
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	-	res x	·		\$1	00.00	\$100.00
Last Name	First Name		MI	Method of	contribution:		Contribution	n ID#	Amount of
Shendell	Marsha			Cash Money	y Order X Personal Cl		1366		Contribution
Residential Street Address		City	•	State	Zip Code	Da	ate Received		
24 Flora Pl		Stamford		СТ	06903-1805	08	8/14/2009	1	
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		1? <b>브</b>		
community activist		none listed			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis		Aggreg	gate Contribut	tions	
Is yes, indicate which branch or branches of		Executive Legislative		child of a lob	-		\$1	00.00	\$100.00

		I. MONETAR	RY RECE	IPTS	(Section	n A-I)				
NAME OF COMMITTEE								I	FILING	DUE DATE
Dan Malloy For Connecticut (C	TT)							(	Origina	1 10/13/2009
		B. Itemized Cor	ntributions	from	Individu	als		<u> </u>		
Last Name Jaffe	First Name Alan		MI	I	Method of o	contribution:  X Personal C Order Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 69 Brookhollow Ln		City Stamford			State CT	Zip Code 06902-1014	1	8/14/2009		
Principal Occupation attorney		Name of Employer  Jaffe & Jaffe				Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Z	dep		tor a lobbyist child of a lobbes	byist?	Aggre	gate Contributio \$2!	ons 5.00	\$25.00
Last Name Sender	First Name Milton		MI	I	Method of c Cash Money	X Personal C		Contribution 1	ID#	Amount of Contribution
Residential Street Address 700 Fairfield Ave		City Stamford			State CT	Zip Code 06902-7532	- 1	ate Received 8/14/2009		
Principal Occupation food marketing		Name of Employer  Daymon Worldwide				Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes 2	dep		tor a lobbyist child of a lobbes	oyist?	Aggre	egate Contributio \$37!	ons 5.00	\$375.00
Last Name Rogers	First Name David		MI A	I	Method of o	X Personal C		Contribution 1	ID#	Amount of Contribution
Residential Street Address 26 Half Moon Way		City Stamford			State CT	Zip Code 06902-7727	- 1	ate Received 8/14/2009		
Principal Occupation none listed		Name of Employer  Daymon Worldwide				Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes 2  Executive Legislative	dep		tor a lobbyist child of a lobbes	pyist?	Aggre	egate Contributio \$100	ons 0.00	\$100.00
Last Name Teig	First Name Bernard		MI	I	Method of cash Cash Money	contribution: Personal C Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 295 Quarry Rd		City Stamford			State CT	Zip Code 06903-5011	- 1	ate Received 8/14/2009		
Principal Occupation accountant		Name of Employer self		•		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Z	dep		tor a lobbyist child of a lobb	oyist?	Aggre	gate Contributio \$100	ons 0.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Zagaja	Kenneth				Cash Money	y Order		1370		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
12 Cornish Rd		Wethersf	ield		СТ	06109-1415	0	8/14/2009	1	
Principal Occupation Systems Analyst		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut	tions \$5.00	\$5.00
government the contract is with:  Last Name	First Name			MI	1	contribution:			TD #	
Grebey	Clarence			R	Cash	Personal C  y Order X Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
227 Brookdale Rd		Stamford	I		СТ	06903-4118	0	8/16/2009		
Principal Occupation		Name of En	mployer		•	Is this contribution associ			Yes	
SVP		Waggene	er Edstrom Worldwic	le		fundraising event listed in If yes, list Event #	Section .	J1?	No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob yes	byist?	Aggre	egate Contribut \$	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Leydon	Stacey			А	Cash Money	y Order Personal C		1372		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
222 Roxbury Rd		Stamford	<u> </u>		СТ	06902-1222	0	8/17/2009		
Principal Occupation		Name of En	mployer			Is this contribution associ fundraising event listed in		a x	Yes	
homemaker		n/a				If yes, list Event # 07.			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	•	Yes X No		utor a lobbyis child of a lob		Aggre	egate Contribut	tions 50.00	\$50.00
government the contract is with:		Executive	Legislative	Y	res X	No				, , , , , , , , , , , , , , , , , , , ,
Last Name	First Name			MI		contribution:		Contribution	n ID#	Amount of
Berni	Stephen				Cash Money	y Order Personal C		1373		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
172 Gary Rd		Stamford			СТ	06903-4829		8/17/2009	_	•
Principal Occupation Retired		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	•	Yes X No	dependent	utor a lobbyis	byist?	Aggre	egate Contribut	tions	\$100.00
government the contract is with:		Executive	Legislative	L Y	res x	No				

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		<u> </u>	
Last Name Mullender	First Name Pamela		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 13	ntribution ID#	Amount of Contribution
Residential Street Address 3508 Fairway Dr N		City Jupiter	•	State FL	Zip Code 33477-9524	Date Re 08/17	eceived 7/2009	]
Principal Occupation President/CEO		Name of Employer Ace Mentor Program			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$375.00	\$375.00
Last Name Seplowitz	First Name Sheldron		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 13	ntribution ID#	Amount of Contribution
Residential Street Address 79 Fawnfield Rd		City Stamford		State CT	Zip Code 06903-3727	Date Re 08/17	eceived 7/2009	
Principal Occupation retired		Name of Employer self		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00
Last Name Marnin	First Name Vicki		MI N	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck 13	ntribution ID#	Amount of Contribution
Residential Street Address 411 Durham Rd		City Madison		State CT	Zip Code 06443-2041	Date Re 08/17	eceived 7/2009	
Principal Occupation midwife		Name of Employer Birth & Beyond			Is this contribution associate fundraising event listed in State If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$5.00	\$5.00
Last Name Marnin	First Name Stephanie	9	MI M	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck 13	ntribution ID#	Amount of Contribution
Residential Street Address 411 Durham Rd		City Madison		State CT	Zip Code 06443-2041	Date Re 08/17	eceived 7/2009	
Principal Occupation Attorney		Name of Employer Outten & Golden LLP		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$5.00	\$5.00

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contribu	tions fron	ı Individu	ıals			
Last Name	First Name		MI	Method of	contribution:	_	Contribution ID #	Amount of
Harris	Kim			Cash Money	y Order X Personal C	1	1379	Contribution
Residential Street Address		City	•	State	Zip Code	Date I	Received	1
46 Rockledge Dr		Stamford		СТ	06902-8124	08/1	19/2009	
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
Creative Link		recruiter			If yes, list Event #		<b>x</b> No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis		Aggregate	e Contributions	1
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		child of a lob	-		\$100.00	\$100.00
Last Name	First Name		MI	Method of	contribution:	С	Contribution ID #	Amount of
Leighton	Mark		D	Cash Money	y Order Registration X Personal Control Contro	1	1380	Contribution
Residential Street Address		City	-	State	Zip Code	Date I	Received	1
21 Birchview Dr		Ellington		СТ	06029-2243	08/1	19/2009	
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
Attorney		Leighton, Katz& Drapean			If yes, list Event #	Section 31:	<b>X</b> No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate	e Contributions	1
Is yes, indicate which branch or branches of	П	Executive Legislative		child of a lob	-		\$50.00	\$50.00
government the contract is with:  Last Name	First Name		MI		contribution:		Contribution ID #	
Hebert	Donald		j	Cash	X Personal C	heck 1	1381	Amount of Contribution
D 11 (10) (A11		C'			y Order Credit/Deb		Received	-
Residential Street Address 35 Rainbow Crk		City Windsor		State	Zip Code 06095-1172		19/2009	
Principal Occupation		Name of Employer			Is this contribution associa	ted with a	x Yes	†
Computer Programmer		DST Output			fundraising event listed in  If yes, list Event # 072		☐ No	
Is contributor a principal of a state contractor	or prospective	Yes X No	In contrib	utor a lobbyis				+
state contractor?  Is yes, indicate which branch or branches of	or prospective	Yes X No		child of a lob	byist?	Aggregate	e Contributions \$10.00	\$10.00
government the contract is with:		Executive Legislative	<u> </u>	res X	No	<u> </u>		
Last Name	First Name		MI		contribution:		Contribution ID #	Amount of
Sullivan	James			Cash Money	y Order X Credit/Deb	1	1382	Contribution
Residential Street Address		City		State	Zip Code	Date I	Received	]
237 Buckingham St # 261798		Hartford		СТ	06106-1607	08/1	19/2009	
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
attorney		n/a			If yes, list Event #	- '	x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate	e Contributions	1
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		child of a lob	-		\$100.00	\$100.00

		I. N	MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	temized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Kucera	Nancy				Cash Money	y Order		1383		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received	l	
1700 S Bayshore Ln Apt 4B		Miami			FL	33133-4058	0	8/19/200	9	
Principal Occupation		Name of E	Employer			Is this contribution associ fundraising event listed in			Yes	
N/A		N/A				If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	-		\$	375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID#	Amount of
Cohen	Miriam				Cash Money	y Order		1385		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
21B Coldbrooke S		Lenox			MA	01240-2713	0	8/22/200	9	
Principal Occupation		Name of E	imployer			Is this contribution associ fundraising event listed in			Yes	
retired		n/a				If yes, list Event #	. occuon .	···	No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of				1 —	child of a lob	•		:	\$50.00	\$50.00
government the contract is with:		Executive	Legislative	<u> </u>				1		<u> </u>
Last Name Capece	First Name Matthew			MI	Method of Cash	contribution: Personal C	Check	Contributi	on ID#	Amount of Contribution
Cupose						y Order X Credit/Del	bit Card	1384		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
8 Mountain St		Derby			СТ	06418-1308	0	8/23/200	9	
Principal Occupation		Name of E		-1		Is this contribution associ fundraising event listed in		<sub>J1?</sub> L	Yes	
Union Representative		United	Brotherhood of Carpe	nters		If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 —	child of a lob	-		\$	100.00	\$100.00
government the contract is with:	First Name	Executive	Legislative	I MI	1			I		<u> </u>
Last Name Kucera	Philip			E	Cash	contribution: Personal C	Check	Contributi	on ID#	Amount of Contribution
		,			Mone	y Order X Credit/Del	bit Card	1386		
Residential Street Address		City			State	Zip Code		Date Received		
! 700 S Bayshore Ln # 4B		Miami			FL	33133	_	08/24/200	9	
Principal Occupation		Name of E	Employer			Is this contribution associ fundraising event listed in		J1?	_	
N/A						If yes, list Event #		<u>\</u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$	375.00	\$375.00

		I. M	IONETARY RI	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	tions fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Garvey	Virginia			М	Cash Money	y Order X Personal C		1387		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
88 Notch Hill Rd Apt 307		North Bra	anford		СТ	06471-1851	0	8/25/2009	)	
Principal Occupation Consultant		Name of Er Self	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	tions 25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Dulaney	Fred				Cash Money	y Order		1388		Contribution
Residential Street Address	-	City		-	State	Zip Code	D	ate Received		
65 McIntosh Rd		Stamford	I		СТ	06903-1833	0	8/25/2009	)	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	
writer		Gartner				fundraising event listed in If yes, list Event #	Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	tions 325.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Wattenberg	Ruth			D	Cash Money	y Order Personal C		1389		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
122 Palmers Hill Rd Unit 1103		Stamford	<u> </u>		СТ	06902-2135	0	8/25/2009	)	1
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in			Yes	
retired		retired				If yes, list Event #	· Section .	x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		outor a lobbyis		Aggre	gate Contribu	tions	†
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Î	t child of a lob	*		\$1	.00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Knox	Beverley			G	Cash Money	y Order		1390		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
1525 Newfield Ave		Stamford	l		СТ	06905-1504	0	8/25/2009	)	]
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
n/a		retired				fundraising event listed in If yes, list Event #	section.	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	i	t child of a lob Yes	•		\$1	.00.00	\$100.00
government the contract is with:		LACCULIVE	Legisianve			110	1			

			I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
	NAME OF COMMITTEE									FILING	G DUE DATE
	Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
Ĭ			B. It	emized Contributi	ions from	Individu	ıals				
Ī	Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
	Knox	George				Cash	y Order X Personal C		1392		Contribution
ŀ			l		ı				<del> </del>		
	Residential Street Address 1525 Newfield Ave		City Stamford	ı		State CT	Zip Code 06905-1504		Pate Received 18/25/2009		
						1 01	Is this contribution associ			1	
	Principal Occupation Retired		Name of Er None	mployer			fundraising event listed in		J1? <b>브</b>	Yes	
	Retired						If yes, list Event #		X	No	
	Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	
	state contractor? Is yes, indicate which branch or branches of		<b>.</b>			child of a lob	*		\$1	00.00	\$100.00
	government the contract is with:		Executive	Legislative	+ =	1			1		
	Last Name Goldberg	First Name Alfred			MI J	Method of Cash	contribution:	heck	Contribution	n ID#	Amount of Contribution
	Goldberg	Allieu			ľ		y Order Credit/Del		1391		Contribution
Ī	Residential Street Address		City			State	Zip Code	D	ate Received		
	60 Colonial Rd		Madison			СТ	06443-1912	0	8/25/2009	1	
ſ	Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
	elected official		Town of	Madison			fundraising event listed in If yes, list Event #	Section .	J1?	No	
	T			Yes X No	1, , ,		_	1			
	Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	egate Contribut	00.00	\$100.00
	Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	☐ Y	res x	No		ÞΤ	00.00	\$100.00
Ī	Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
	Murphy	Maureen			А	Cash	Personal C		1393		Contribution
ŀ			1				y Order X Credit/Del		<u> </u>		
	Residential Street Address 1678 Randolph Rd		City Middletov	wn.		State CT	Zip Code 06457-4043		Pate Received 18/27/2009		
ŀ						1 61				1	•
	Principal Occupation  Lawyer		Name of Er self	nployer			Is this contribution associ fundraising event listed in		J1? <b>브</b>	Yes	
	Lawyei		Jen				If yes, list Event #		X	No	
	Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribut	tions	
	state contractor? Is yes, indicate which branch or branches of	П				child of a lob	*		\$2	50.00	\$250.00
	government the contract is with:		Executive	Legislative	+ -	res x			1		
	Last Name Mount	First Name Michael			MI D	Method of Cash	contribution:	`heck	Contribution	n ID#	Amount of
	Mount	Michael				_	y Order Credit/Del		1397		Contribution
ľ	Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
	51 Jockey Hollow Rd		Monroe			СТ	06468-1203	0	8/31/2009	1	
Ī	Principal Occupation		Name of Er	nployer		•	Is this contribution associ		1^1	Yes	
	consultant		Black & '	Veatch			fundraising event listed in If yes, list Event # 07		J1?	No	
					T.		_	T			
	Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	egate Contribut		
	Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y		-		\$	25.00	\$25.00
L								•			•

		I. MONETARY	RECEII	PTS (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contr	ributions fi	rom Individu	ıals		•	
Last Name Kweskin	First Name		MI	Method of Cash	contribution:	Contribu	tion ID #	Amount of
KWeSKIII	Daviu				y Order Credit/Deb	1394		Contribution
Residential Street Address 7 Lumanor Dr		City Stamford		State CT	Zip Code 06903-5020	Date Receive 08/31/200		
Principal Occupation market research		Name of Employer Trig		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contril	outions 5100.00	\$100.00
Last Name Kweskin	First Name Lorraine		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	l 1395	tion ID#	Amount of Contribution
Residential Street Address 7 Lumanor Dr		City Stamford		State CT	Zip Code 06903-5020	Date Receive 08/31/200		
Principal Occupation market research		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contril	outions 5100.00	\$100.00
Last Name Wells	First Name Barbara		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	1398	tion ID#	Amount of Contribution
Residential Street Address 18 Lakewood Cir N		City Greenwich		State CT	Zip Code 06830-7119	Date Receive 08/31/200		
Principal Occupation Real Estate		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event # 072	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contril	outions 5100.00	\$100.00
Last Name Jaffe	First Name Sari		MI	Cash	contribution:    X   Personal Cl y Order	1396	tion ID#	Amount of Contribution
Residential Street Address 69 Brookhollow Ln		City Stamford		State CT	Zip Code 06902-1014	Date Receive 08/31/200		
Principal Occupation attorney		Name of Employer  Jaffe & Jaffe		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ontributor a lobbyis endent child of a lob	byist?	Aggregate Contril	sutions \$25.00	\$25.00

		I. MONE	TARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Itemize	d Contributi	ons from	Individu	ıals				
Last Name Piaser	First Name Sydelle			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 1399	on ID #	Amount of Contribution
Residential Street Address 26 Mohawk Trl		City Stamford		•	State CT	Zip Code 06903-1609		ate Received 8/31/2009		
Principal Occupation homemaker		Name of Employer n/a				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive L	es X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Kriftcher	First Name Jean			MI L	Cash	contribution:  X Personal of the Credit/De		Contribution 1400	on ID#	Amount of Contribution
Residential Street Address 202 Dogwood Ln		City Stamford			State CT	Zip Code 06903-4518		ate Received 8/31/2009		
Principal Occupation none		Name of Employer none				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive L	es X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Kriftcher	First Name Brian			MI S	Cash	contribution:    X   Personal 0		Contribution 1401	on ID#	Amount of Contribution
Residential Street Address 51 Deer Meadow Ln		City Stamford			State CT	Zip Code 06903-1528		ate Received 8/31/2009		
Principal Occupation retired		Name of Employer retired			•	Is this contribution associ fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive L	es X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Gianquinto	First Name Matthew			MI	Cash	contribution: Personal of Variation    y Order    X Credit/De		Contribution 1402	on ID#	Amount of Contribution
Residential Street Address 215 Oxford St		City Hartford			State CT	Zip Code 06105-2249		ate Received 9/03/2009		
Principal Occupation Staff		Name of Employer Dan Malloy for	СТ			Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Ye Executive L	es X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$95.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Stokes	Alice			E	Cash Money	y Order X Personal Credit/De		1404		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
221 Willow St		Southpor	t		СТ	06890-1429	0	9/08/2009	Ð	
Principal Occupation n/a		Name of Er	nployer		•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	itions 575.00	\$75.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Dansky	Gari			н	Cash Money	y Order Resonated Credit/De		1405	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
9 Sandy Ln		Greenwic	ch		СТ	06831-2921	0	9/08/2009	)	
Principal Occupation		Name of Er	nployer		•	Is this contribution assoc			Yes	
interior designer		self				fundraising event listed is If yes, list Event #	n section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$1	tions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Orgeva	Ernie				Cash Money	y Order		1406		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
88 Gaymoor Dr		Stamford	<u> </u>		СТ	06907-1329	0	9/08/2009	<del></del>	
Principal Occupation		Name of Er				Is this contribution assoc fundraising event listed in		J1?	_	
supervisor		City of S	camora			If yes, list Event #		x	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob		Aggre	egate Contribu	itions	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res X	No		φ <u>1</u>		\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Gentile	Edward			L	Cash Money	y Order Personal Credit/De		1407		Contribution
Residential Street Address		City			State	Zip Code	1	ate Received		
10 Sun Dance Cir		Stamford	<u> </u>		СТ	06905-1713	0	9/08/2009	9	
Principal Occupation civil engineer		Name of Er City of S				Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	•	Yes X No		outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	itions	\$100.00
government the contract is with:		Executive	Legislative		res X	No				+===700

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemized Contri	ibutions	s from	Individu	ials				
Last Name Martinez	First Name Luz Divina	a	N	MI	Method of o	contribution: Personal (		Contribution 1408	on ID#	Amount of Contribution
Residential Street Address 55 N Water St		City Norwalk			State CT	Zip Code 06854-2345		ate Received 9/08/2009	)	
Principal Occupation Insurance Agent		Name of Employer Wm F Malloy Agency				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative			tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	tions 550.00	\$50.00
Last Name Alswanger	First Name Herman		M P	MI D	Method of o	contribution:    X   Personal (		Contribution 1403	on ID #	Amount of Contribution
Residential Street Address 87 Idlewood Dr		City Stamford			State CT	Zip Code 06905-2405		ate Received 9/08/2009	9	
Principal Occupation retired educator		Name of Employer retired				Is this contribution associ fundraising event listed in If yes, list Event #		un?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative			tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$1	.00.00	\$100.00
Last Name Lotstein	First Name Nina		M	MI	Cash	contribution:    X   Personal 0		Contribution 1410	on ID#	Amount of Contribution
Residential Street Address 157 Sweet Briar Rd		City Stamford			State CT	Zip Code 06905-1515		ate Received	)	
Principal Occupation Homemaker		Name of Employer Self Employed				Is this contribution associ fundraising event listed in If yes, list Event #		H2 -	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative	Is de		ttor a lobbyist child of a lob	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Malin	First Name Judd		M	МI	Method of o	contribution:    X   Personal 0		Contribution 1409	on ID #	Amount of Contribution
Residential Street Address 43 Harbor Dr Apt 500		City Stamford			State CT	Zip Code 06902-7470		ate Received 9/09/2009	9	
Principal Occupation executive		Name of Employer Robert Malin Realty, LLC	2			Is this contribution associ fundraising event listed in If yes, list Event #		u? <b>_</b>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative			tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contributi	ons fron	Individu	ıals		•	
Last Name Flynn	First Name Charles		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 14	entribution ID #	Amount of Contribution
Residential Street Address 5 Governor Winthrop Blvd		City New London		State CT	Zip Code 06320-6423	Date Re 09/09	eceived 9/2009	
Principal Occupation Police Officer		Name of Employer City of New London			Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name Ronalter	First Name Thomas		MI G	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 14	ntribution ID#	Amount of Contribution
Residential Street Address 95 Dover Rd		City New Britain		State CT	Zip Code 06052-1915	Date Re 09/09	eceived 9/2009	
Principal Occupation  Deputy Fire Chief		Name of Employer  New Britain Fire Department		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate (	Contributions \$375.00	\$375.00
Last Name Rothenberg	First Name Robin		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 14	entribution ID #	Amount of Contribution
Residential Street Address 3119 Miro Dr S		City Palm Beach Gardens		State FL	Zip Code 33410-1285	Date Re 09/09	eceived 9/2009	
Principal Occupation housewife		Name of Employer n/a			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob yes	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name Leandro	First Name Carla		MI	Cash	contribution:    X   Personal Cl	neck 14	ntribution ID#	Amount of Contribution
Residential Street Address 41 Deer Ridge Rd		City Stonington		State CT	Zip Code 06378-1915	Date Re 09/10	eceived 0/2009	
Principal Occupation housekeeper		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$20.00	\$20.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemized	Contributio	ons from	Individu	ıals				
Last Name Luxenberg	First Name Geoffrey			MI	Cash	contribution: Personal y Order X Credit/Do		Contribution 1414	on ID#	Amount of Contribution
Residential Street Address 78 Deer Run Trl		City Manchester			State CT	Zip Code 06042-2487		Pate Received	9	
Principal Occupation Director of Campaign Operations		Name of Employer Larson for Congre	ess			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legi	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	550.00	\$50.00
Last Name Webb	First Name Peggy			MI	Cash	contribution: Personal y Order X Credit/Do		Contribution 1416	on ID#	Amount of Contribution
Residential Street Address 64 Woodbury HI		City Woodbury			State CT	Zip Code 06798-2963		Pate Received	Ð	
Principal Occupation retired		Name of Employer retired			•	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legi	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu \$2	ations 200.00	\$50.00
Last Name Jukoski	First Name Mary Eller	1		MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 1417	on ID#	Amount of Contribution
Residential Street Address 7 Mackinnon Pl		City East Lyme			State CT	Zip Code 06333-1534		Pate Received	9	
Principal Occupation college educator		Name of Employer Mitchell College				Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legi	X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribu \$2	tions 204.00	\$50.00
Last Name Percy	First Name Marilyn			MI	Cash	contribution:  X Personal y Order Credit/Do		Contribution 1420	on ID #	Amount of Contribution
Residential Street Address 14 New Shore Rd		City Waterford			State CT	Zip Code 06385-3609		Pate Received	Ð	
Principal Occupation Commmunity Volunteer		Name of Employer none				Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legi	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu \$1	tions	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Item	ized Contributio	ons from	Individ	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Stanback	Anne				Cash Mone	y Order X Credit/De		1426		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received	I	
44 Wright Dr		Avon			СТ	06001-2106	0	9/11/200	9	
Principal Occupation  Not employed		Name of Emplo	yer			Is this contribution assoc fundraising event listed in		J1?	Yes No	
				1		If yes, list Event #	1			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	obyist?	Aggre	egate Contrib	utions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Luxenberg	Geoffrey				Cash Mone	y Order X Personal Credit/De		1419		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
78 Deer Run Trl		Manchester			СТ	06042-2487	0	9/11/200	9	
Principal Occupation  Director of Campaign Operations	oyer Congress			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	-	Aggre	egate Contribu	utions 100.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID#	Amount of
Smithers	Ruth				Cash Mone	y Order X Personal Credit/De		1418		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
25 Kimberly Pl		New Canaan	1		СТ	06840-4512	0	9/11/200	9	
Principal Occupation		Name of Emplo	yer			Is this contribution assoc fundraising event listed is		J1?		
Educational Consultant		Self				If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib		, 450.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative			No		;	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Collins	David				Cash Mone	y Order Personal Credit/De		1421		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
39 Learned St		New London	l		СТ	06320-3807	0	9/11/200	9	ļ
Principal Occupation		Name of Emplo	yer			Is this contribution assoc fundraising event listed in		I12 <b>L</b>		
flooring estimator		2011				If yes, list Event #		Įx	No No	
Is contributor a principal of a state contractorstate contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	-	Aggre	egate Contribu	utions \$60.00	\$60.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contributi	ons fron	Individu	ıals		•	
Last Name Budnick	First Name Neil		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 14	ntribution ID #	Amount of Contribution
Residential Street Address 718 Ponus Ridge Rd .		City New Canaan		State CT	Zip Code 06840	Date Re	eceived L/2009	
Principal Occupation  Consultant		Name of Employer Channel Rock Partners		•	Is this contribution associate fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$250.00	\$250.00
Last Name Jakubowski	First Name Jason		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 14	ntribution ID #	Amount of Contribution
Residential Street Address 33 Westminster Dr		City West Hartford		State CT	Zip Code 06107-3353	Date Re 09/11	eceived L/2009	
Principal Occupation Administrator		Name of Employer Charter Oak State College		•	Is this contribution associate fundraising event listed in State of the If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name Reynolds	First Name Richard		MI D	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 14	ntribution ID #	Amount of Contribution
Residential Street Address 224A Agawam Dr		City Stratford		State CT	Zip Code 06614-8197	Date Re	eceived L/2009	
Principal Occupation none		Name of Employer none			Is this contribution associate fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$10.00	\$10.00
Last Name Reynolds	First Name Donna Le	e	MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 14	ntribution ID#	Amount of Contribution
Residential Street Address 224A Agawam Dr		City Stratford		State CT	Zip Code 06614-8197	Date Re 09/11	eceived 1/2009	
Principal Occupation none		Name of Employer none			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Dan Malloy For Connecticut (C	T)							Origina	al 10/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals				
Last Name	First Name		MI		contribution:		Contribution	n ID#	Amount of
Chase	Christoph	er		Cash Money	y Order X Credit/Deb		1427		Contribution
Residential Street Address 436 Weed St		City New Canaan		State CT	Zip Code 06840-6125		ate Received		
Principal Occupation		Name of Employer		1	Is this contribution associa	_			
Investment Banker		Morgn Joseph & Co.			fundraising event listed in If yes, list Event #	Section J1	1? <b>x</b>	No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contributi \$37	ions 75.00	\$375.00
Last Name	First Name		MI		contribution:	hack	Contribution	n ID#	Amount of
Lopes	Richard			Cash Money	y Order X Credit/Deb		1428		Contribution
Residential Street Address 208 S Mountain Dr		City New Britain		State CT	Zip Code 06052-1514		nte Received 9/12/2009		
Principal Occupation aide		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contributi \$10	ions 00.00	\$100.00
Last Name Morrow	First Name Polly		MI O	Cash	contribution: Personal Cl y Order X Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 19 Field St		City Stamford		State CT	Zip Code 06906-2314		ate Received		
Principal Occupation  Community Relations		Name of Employer Pitney Bowes Inc.			Is this contribution associa fundraising event listed in If yes, list Event #		<sub>1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contributi \$10	ions 00.00	\$100.00
Last Name Olson	First Name Jerry		MI G	Cash	contribution:    X   Personal Cl		Contribution	n ID#	Amount of Contribution
Residential Street Address PO Box 176		City Mystic		State CT	Zip Code 06355-0176		nte Received 9/12/2009		
Principal Occupation Owner		Name of Employer Mall Inc.		<b>!</b>	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contributi \$5	ions 50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origii	nal 10/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name	First Name		MI	Method of	contribution:	Cor	ntribution ID #	Amount of
Kuckro	Lee		G	Cash Money	Personal Ch y Order X Credit/Debi	14	31	Contribution
Residential Street Address		City		State	Zip Code	Date Re		
471 Main St		Wethersfield		СТ	06109-1818	09/13	3/2009	_
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in S		Yes	
lawyer		retired	-		If yes, list Event #		x No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis		Aggregate C	Contributions	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	1 î—	res x	*		\$100.00	\$100.00
Last Name	First Name		MI	Method of	contribution:	Cor	ntribution ID#	Amount of
Moran	Gerald			Cash Money	Personal Ch y Order X Credit/Debi	14	32	Contribution
Residential Street Address		City		State	Zip Code	Date Re	eceived	
5 Echo Ln		Norwalk		СТ	06851-1605	09/13	3/2009	
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in S		Yes	
ret.		n/a			If yes, list Event #	occuon v i .	x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate C	Contributions	†
state contractor? Is yes, indicate which branch or branches of		Provident D Localitation	1 î—	child of a lob	*		\$100.00	\$100.00
government the contract is with:	<u></u> І	Executive Legislative	<del>                                     </del>			1		<u> </u>
Last Name Carney	First Name Maureen		MI	Cash	contribution: Personal Ch	neck	ntribution ID#	Amount of Contribution
		1		Money	y Order X Credit/Debi	t Card	-33	_
Residential Street Address		City		State	Zip Code	Date Re		
355 Norton St		New Haven		СТ	06511-7115	09/13	3/2009	4
Principal Occupation		Name of Employer Home Instead Senior Care			Is this contribution associate fundraising event listed in S		Yes	
CareGiver		Home Instead Sellior Care			If yes, list Event #		<b>x</b> No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate C	Contributions	1
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative	1 —	child of a lob	•		\$39.00	\$39.00
government the contract is with:  Last Name	First Name	Executive Eegistative	<u> </u>	1	contribution:			1
Howell	Ruth		S	Cash	Personal Ch	neck	ntribution ID#	Amount of Contribution
		1		Money	y Order X Credit/Debi			4
Residential Street Address		City		State	Zip Code	Date Re		
14 Red Orange Rd		Middletown		СТ	06457-4916  Is this contribution associate	<u> </u>	5/2009	-
Principal Occupation  Educational Consultant		Name of Employer State of CT, Dept. of Social S	Services		fundraising event listed in S		Yes	
			•		If yes, list Event #		x No	1
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis child of a lob		Aggregate C	Contributions	
Is yes, indicate which branch or branches of		Executive Legislative	1 —	res x	-		\$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons from	Individ	uals				
Last Name Jones-Bronin	First Name R. Elaine			MI	Cash	contribution: Personal ( y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 11 Windabout Dr		City Greenwic	ch		State CT	Zip Code 06831-3702		ate Received		
Principal Occupation art		Name of E self	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lol res		Aggre	gate Contribi	utions 375.00	\$375.00
Last Name Deragon	First Name Russell			MI	Cash	contribution:  X Personal ( y Order		Contributi 1437	on ID#	Amount of Contribution
Residential Street Address 97 W Main St Apt 88		City Niantic			State CT	Zip Code 06357-1732		ate Received 9/14/200		
Principal Occupation Episcopal Priest		Name of E retired	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lol 'es X		Aggre	gate Contrib	utions 100.00	\$25.00
Last Name Seaman	First Name Gregory			MI G	Cash	contribution:  X Personal C  y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 75 Clear Lake Rd		City Guilford			State CT	Zip Code 06437-1440		ate Received		
Principal Occupation retired		Name of E Retired	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lol Yes		Aggre	gate Contrib	utions \$25.00	\$25.00
Last Name Smith	First Name Lois			MI	Cash	contribution:  X Personal 0  y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 75 Clear Lake Rd		City Guilford			State CT	Zip Code 06437-1440		ate Received		
Principal Occupation Retired		Name of E None	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lol res		Aggre	gate Contrib	utions \$25.00	\$25.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Mayo	First Name Reginald		MI	Method of Cash	contribution:		ution ID#	Amount of Contribution
		I			y Order Credit/Debi	t Card		1
Residential Street Address 435 Stevenson Rd		City New Haven		State CT	Zip Code 06515-2471	Date Receiv		
Principal Occupation Superintendent		Name of Employer  New Haven Board of Education	on		Is this contribution associat fundraising event listed in S If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Gyllenhammer	First Name Edmund		МІ	Cash	contribution:  X Personal Ch  y Order Credit/Debi	eck 1439	ution ID#	Amount of Contribution
Residential Street Address 81 Hartford Ave		City Old Saybrook		State CT	Zip Code 06475-1973	Date Receiv		
Principal Occupation Retired		Name of Employer Retired			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$25.00	\$25.00
Last Name Buel	First Name Marilyn		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	eck 1440	ution ID#	Amount of Contribution
Residential Street Address 55 N Main St		City Essex		State CT	Zip Code 06426-1073	Date Receiv		
Principal Occupation Retired		Name of Employer Retired		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cont	ributions \$25.00	\$25.00
Last Name Nussbaum	First Name Peter		МІ	Cash	contribution: Personal Ch  y Order X Credit/Debi	eck 1441	ution ID#	Amount of Contribution
Residential Street Address 29 Dogwood Ln		City Westport		State CT	Zip Code 06880-5022	Date Receiv		
Principal Occupation attorney		Name of Employer S.A.C. Capital Advisors, L.P.		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cont	ributions \$375.00	\$375.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Carbone	Michelle			М	Cash Money	Personal C  x Credit/Del		1442		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
1801 Ave of Stars Ste 825		Los Ange	les		CA	90067-5800	0	9/14/2009	)	
Principal Occupation Consultant		Name of Er Self	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 75.00	\$375.00
Last Name	First Name			MI		contribution:		Contributio	n ID#	
МасКау	Marilyn				Cash	Personal C  y Order		1443	m 1D #	Amount of Contribution
Residential Street Address	•	City		<u>'</u>	State	Zip Code	D	ate Received		
92 Wyassup Lake Rd		North Sto	onington		СТ	06359-1124	0	9/15/2009	)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
retired		retired				fundraising event listed in If yes, list Event #	i section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Pollak	Edward				Cash Money	y Order X Credit/Del		1444		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
1920 Long Ridge Rd		Stamford	<u> </u>		СТ	06903-3232	0	9/15/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		J1?		
Retired		None				If yes, list Event #		<u>x</u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis		Aggre	gate Contribu	tions	ĺ
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		t child of a lob res	•		\$3	00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Spiegel	Merle				Cash Money	y Order X Credit/Del		1446		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
230 Saugatuck Ave Apt 13		Westport	:		СТ	06880-6401	0	9/16/2009	)	ļ
Principal Occupation communications director		Name of Er Purdue F	nployer Pharma L.P.			Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	•	Yes X No		outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	tions	\$100.00
government the contract is with:		Executive	Legislative		res X	No				

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Ite	mized Contributi	ons from	ı Individu	ıals				
Last Name McNally	First Name Timothy			MI W	Cash	contribution:    X   Personal C		Contribution 1445	n ID#	Amount of Contribution
Residential Street Address 60 Chase Hill Rd		City Pomfret C	enter		State CT	Zip Code 06259-1302		Pate Received 19/16/2009		
Principal Occupation Business Manager		Name of Em				Is this contribution association fundraising event listed in If yes, list Event #		<sub>11?</sub> $f lue{}$	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$10	ions 00.00	\$100.00
Last Name Fitzgerald	First Name Brian			MI	Cash	contribution: Personal C  Order X Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 40 Fox Run Ln		City Greenwich	า		State CT	Zip Code 06831-3737		Pate Received		
Principal Occupation Investments		Name of Em Capital Pa			•	Is this contribution association fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$3	ions 75.00	\$375.00
Last Name Sher	First Name Alvin			MI	Cash	contribution: Personal C  Order X Credit/Det		Contribution 1448	n ID#	Amount of Contribution
Residential Street Address 4 N Pine St		City Niantic			State CT	Zip Code 06357-2769		Pate Received		
Principal Occupation  Artist		Name of Em	ployer		•	Is this contribution association fundraising event listed in If yes, list Event #		<sub>J1?</sub> 브	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut \$3	ions 30.00	\$30.00
Last Name Spiegelman	First Name Christoph	er		MI J	Cash	contribution: Personal C  Order X Credit/Det		Contribution 1449	n ID#	Amount of Contribution
Residential Street Address 52 Willard Ter		City Stamford			State CT	Zip Code 06903-4926		Pate Received 19/17/2009		
Principal Occupation Tax Director		Name of Em	ployer ey Capital Partners,	LLC		Is this contribution association fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut \$	ions 15.00	\$15.00

	I. MONETARY REC	CEIPTS (Sectio	n A-I)			
NAME OF COMMITTEE					FILING	G DUE DATE
Dan Malloy For Connecticut (CT)					Origina	al 10/13/2009
	B. Itemized Contribution	ons from Individu	ıals			
Last Name First Name Roddy Christoph	er	M Cash	contribution:  Personal Cl  y Order X Credit/Debi	<b> </b> 1450	on ID#	Amount of Contribution
Residential Street Address 9-1 Macintosh Dr	City Oxford	State CT	Zip Code 06478-3208	Date Received 09/17/200		
Principal Occupation sales	Name of Employer Guest Supply	<b>!</b>	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No  Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	utions 100.00	\$100.00
Last Name First Name Boyle H.P.		Cash	contribution:  Personal Cl  y Order  X Credit/Debi	1452	on ID#	Amount of Contribution
Residential Street Address 150 Goodwives River Rd	City Darien	State CT	Zip Code 06820-5807	Date Received 09/17/200		
Principal Occupation Investments	Name of Employer SAC Capital Advisors		Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No  Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	ations 375.00	\$375.00
Last Name Thorne First Name Barbara		Cash	contribution: Personal Cl y Order X Credit/Debi	1451	on ID#	Amount of Contribution
Residential Street Address 37 Dickinson Rd	City Darien	State CT	Zip Code 06820-5332	Date Received 09/17/200		
Principal Occupation Retired	Name of Employer N/A	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No  Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	utions 100.00	\$100.00
Last Name First Name Spauster Edward		Cash	contribution: Personal Cl y Order X Credit/Debi	<b> </b> 1455	on ID#	Amount of Contribution
Residential Street Address 272 N Bedford Rd	City Mt Kisco	State NY	Zip Code 06877-4221	Date Received 09/17/200		
Principal Occupation CEO	Name of Employer Richmond Community Service	es	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:	Yes X No  Executive Legislative	Is contributor a lobbyis dependent child of a lob	byist?	Aggregate Contribu	utions \$25.00	\$25.00

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009
		B. Itemized Contribu	tions fron	ı Individu	ıals			
Last Name	First Name		MI	Method of	contribution:	Cont	ribution ID#	Amount of
Kirby	John			Cash Mone	y Order	145	56	Contribution
Residential Street Address		City		State	Zip Code	Date Rec	eived	]
88 Saddle Rock Rd		Stamford		СТ	06902-8230	09/18/	2009	
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
lawyer		retired	_		If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate Co	ontributions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		child of a lob	-		\$100.00	\$100.00
Last Name	First Name		MI	Method of	contribution:	Cont	ribution ID#	Amount of
Suh	H. Anna			Cash Money	y Order	145	57	Contribution
Residential Street Address		City		State	Zip Code	Date Rec	eived	
15 E 91st St # 12A		New York		NY	10128-0648	09/18/	2009	1
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
N/A		N/A			If yes, list Event #	Jeeu (11)	x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate Co	ontributions	†
state contractor? Is yes, indicate which branch or branches of			Î	child of a lob	•		\$375.00	\$375.00
government the contract is with:		Executive Legislative	+ -					<u> </u>
Last Name Garon	First Name Ross		MI	Method of Cash	contribution:  Personal Cl	heck	ribution ID#	Amount of Contribution
					y Order X Credit/Deb	it Card	·8	Commodition
Residential Street Address		City		State	Zip Code	Date Rec		
330 Madison Ave		New York		NY	10017-5001	09/18/	2009	1
Principal Occupation		Name of Employer SAC Capital Advisors			Is this contribution associa fundraising event listed in		Yes	
Managing Director		SAC Capital Advisors			If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate Co	ontributions	1
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative		child of a lob Yes X	-		\$375.00	\$375.00
government the contract is with:	First Name	Executive Legislative	MI	1				<u> </u>
Last Name Jacklin	Michele		MI	Cash	contribution:  Personal Cl	heck	ribution ID#	Amount of Contribution
				Mone	y Order X Credit/Deb	it Card	07	1
Residential Street Address		City		State	Zip Code	Date Rec		
460 Tall Timbers Rd		Glastonbury		СТ	06033-3345	09/18/	2009	1
Principal Occupation		Name of Employer Trinity College			Is this contribution associa fundraising event listed in		Yes	
College administrator		Trinity Conege			If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis		Aggregate Co	ontributions	1
Is yes, indicate which branch or branches of		Executive Legislative		child of a lob Yes X	-		\$50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Kelly	First Name		MI	Method of Cash	contribution:	neck	ntribution ID #	Amount of Contribution
,		T			y Order X Credit/Debi		153 	
Residential Street Address 60 Spring Water Ln		City New Canaan		State CT	Zip Code 06840-6520	Date Re 09/18	eceived 3/2009	
Principal Occupation CTO		Name of Employer SAC Capital		•	Is this contribution associal fundraising event listed in the second of the second second in the second sec		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$375.00	\$375.00
Last Name Conheeney	First Name Thomas		MI	Cash	contribution:  Personal Cl y Order  X Credit/Debi	neck 14	ntribution ID #	Amount of Contribution
Residential Street Address 421 Hoyt Farm Rd		City New Canaan		State CT	Zip Code 06840-5049	Date Re 09/18	eceived 3/2009	
Principal Occupation Finance		Name of Employer SAC Capital Advisors LP		•	Is this contribution associate fundraising event listed in the second of		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$375.00	\$375.00
Last Name Markel	First Name Nan		MI	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck 14	entribution ID #	Amount of Contribution
Residential Street Address 79 Courtland Ave Apt 11		City Stamford		State CT	Zip Code 06902-3454	Date Re	eceived 9/2009	
Principal Occupation retired		Name of Employer retired		•	Is this contribution associate fundraising event listed in the second of the second second in the second se		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$50.00	\$50.00
Last Name Ziemann	First Name Kurt		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 14	ntribution ID#	Amount of Contribution
Residential Street Address PO Box 262		City Chester		State CT	Zip Code 06412-0262		eceived 0/2009	
Principal Occupation warehouse worker		Name of Employer Ceramica Importing			Is this contribution associate fundraising event listed in the second of the second second in the second se		Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$5.00	\$5.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Mark	Julian			S	Cash	Y Order		1461		Contribution
D 11 110 111										
Residential Street Address 181 Turn of River Rd Apt 13		City Stamford			State	Zip Code 06905-1336	1	Pate Received 19/20/2009	)	
Principal Occupation		Name of Er			1	Is this contribution associ			1	İ
Retired dentist		Retired	прюусі			fundraising event listed in		J1?	Yes No	
						If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribu	tions	
Is yes, indicate which branch or branches of government the contract is with:	П	Executive	Legislative	I -	res x	*		\$	50.00	\$50.00
Last Name	First Name			MI	1	contribution:		Contributio	ID #	
Lambiase	Carol				Cash	Personal C	Check	1470	ni 1D #	Amount of Contribution
					Money	y Order X Credit/Del	oit Card	1470		
Residential Street Address		City			State	Zip Code	1	ate Received		
567 Carrington Rd		Bethany			СТ	06524-3158		9/20/2009		ļ
Principal Occupation		Name of Er	<sup>nployer</sup> lectrical Workers Un	ion		Is this contribution associ- fundraising event listed in		J1?	Yes	
Union Representative		Officed E	lectrical Workers On	1011		If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		<b>.</b>			child of a lob	-		\$	35.00	\$35.00
government the contract is with:		Executive	Legislative		1		<u> </u>	1		
Last Name Giordano	First Name Phillip			MI J	Method of Cash	contribution:	Check	Contributio	n ID#	Amount of Contribution
Giordano	11111111			]	_	y Order Credit/Del		1460		Contribution
Residential Street Address	-	City		-	State	Zip Code	D	ate Received		
54 W North St Apt 305		Stamford	<u> </u>		СТ	06902-2222	0	9/20/2009	)	
Principal Occupation		Name of Er	mployer		-	Is this contribution associ			Yes	
Retired		Retired				fundraising event listed in If yes, list Event #	section.	x	No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t spouse or	Agara	aata Cantribu	tions	İ
state contractor?  Is yes, indicate which branch or branches of	_		i es 🖭 No		child of a lob	byist?	Aggie	egate Contribu \$1	50.00	\$50.00
government the contract is with:		Executive	Legislative	L	res x	No				·
Last Name	First Name			MI		contribution:		Contributio	n ID#	Amount of
Hoffmann	Henry			L	Cash Money	Personal C  X Credit/Del		1473		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
29 Valley View Dr		Stamford	1		СТ	06903-3839	0	9/21/2009	)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
Retired		N/A				fundraising event listed in If yes, list Event #	Section .	)1? <b>x</b>	No	
Is contributor a principal of a state contributor	or prospective-	<u> </u>	Yes X No	In	utor o 1-1-1-		Τ.			<del> </del>
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	egate Contribu	00.00	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res X	No	<u> </u>	φ1	.55100	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						С	Origina	1 10/13/2009
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contribution II	D#	Amount of
Piurek	Marilyn			Cash Money	y Order Resonal Character Credit/Debi		1462		Contribution
Residential Street Address		City		State	Zip Code		e Received		
76-2 River St W		Old Saybrook		СТ	06475-1525	09/	/21/2009		
Principal Occupation  Consultant		Name of Employer Self-Employed			Is this contribution associate fundraising event listed in S			res Jo	
		<u> </u>			If yes, list Event #			<u> </u>	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$100		\$100.00
Last Name	First Name		MI	Method of	contribution:		Contribution II	D#	Amount of
Bergstrom	Kip			Cash Money	y Order Resonal Character Credit/Debi		1463		Contribution
Residential Street Address		City		State	Zip Code		e Received		
76-2 River St W		Old Saybrook		СТ	06475-1525		/21/2009		
Principal Occupation administrator		Name of Employer Stamford Urban Redevelopm Commission	ent		Is this contribution associat fundraising event listed in S If yes, list Event #		y X N	∕es √o	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggregat	te Contribution		\$100.00
government the contract is with:		Executive Legislative	+ -			<u> </u>		<u> </u>	
Last Name Lynch	First Name Sharon		MI M	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck	Contribution II	D#	Amount of Contribution
Residential Street Address	•	City		State	Zip Code	Date	e Received		
77 Knollwood Rd		Farmington		СТ	06032-1031	09/	/21/2009		
Principal Occupation		Name of Employer		•	Is this contribution associate			/es	
n/a		Retired			fundraising event listed in S If yes, list Event #	section 31?	X N	No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective			utor a lobbyis	byist?	Aggregat	ite Contribution	ns 5.00	\$25.00
government the contract is with:		Executive Legislative	L   Y	res x	No				
Last Name Campbell	First Name Christoph	or	MI L	Method of Cash	contribution:	neck	Contribution II	D#	Amount of Contribution
Campbell	Спізсорії	ei -			y Order X Credit/Debi		1465		Contribution
Residential Street Address		City		State	Zip Code	Date	e Received		
5 Hundley Ct Apt 1B		Stamford		СТ	06902-3923	09/	/21/2009		
Principal Occupation Director of Sales		Name of Employer Juju, Inc.			Is this contribution associat fundraising event listed in S If yes, list Event #		?	res No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregat	te Contribution		\$100.00

		I. MO	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Itei	mized Contribution	ons from	Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Muir	Heather			А	Cash Mone	y Order X Credit/De		1466		Contribution
Residential Street Address		City			State	Zip Code	Б	Date Received		
1 Strawberry Hill Ave Apt 4D		Stamford			СТ	06902-2611	0	09/21/200	9	
Principal Occupation		Name of Emp	-			Is this contribution associ fundraising event listed in			Yes	
Director of Marketing		Key Air, L	LC			If yes, list Event #		x	No	
Is contributor a principal of a state contractor state contractor?	or prospective	ĺ	Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I —	child of a lob	-		:	\$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Blagdon	Douglas			М	Cash Mone	y Order X Credit/De		1469		Contribution
Residential Street Address		City			State	Zip Code	Е	Date Received		
39 Oak Ridge Ave		Summit			NJ	07901-4305	0	9/21/200	9	
Principal Occupation		Name of Emp	•			Is this contribution associ fundraising event listed in			Yes	
Investment Management		SAC Capit	al Advisors, L.P.			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of			<b>П.</b>	1 <sup>-</sup>	child of a lot	•		\$3	375.00	\$375.00
government the contract is with:	<u></u>	Executive	Legislative	<del>                                     </del>			<u> </u>	1		<u> </u>
Last Name Walter	First Name Judith			MI	Method of Cash	contribution:  Personal O	Check	Contributi	on ID#	Amount of Contribution
Transc.	Juanen				_	y Order X Credit/De	bit Card	1474		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
442 E Carriage Dr Apt 27		Glastonbur	ry		СТ	06033-3328	0	09/22/200	9	
Principal Occupation		Name of Emp	bloyer			Is this contribution associ fundraising event listed in		J12 L		
not employed		n/a				If yes, list Event #		<u> </u> x	No	
Is contributor a principal of a state contractor	or prospective	· [	Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 m	child of a lot	-		!	\$50.00	\$50.00
government the contract is with:	I <sub>E' (M</sub>	Executive	Legislative	<del>                                     </del>				<u> </u>		<u> </u>
Last Name Halsey	First Name Paul			MI	Cash	contribution:  Personal C	Check	Contributi	on ID#	Amount of Contribution
,		1			Mone	y Order X Credit/De	bit Card	1476		
Residential Street Address		City			State	Zip Code		Date Received		
95 Rising Ridge Rd		Ridgefield			СТ	06877-5818	_	)9/22/200	9	
Principal Occupation  IT services		Name of Emp	•			Is this contribution associ fundraising event listed in		J1?	Yes	
11 Services		Carbonze				If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	[
Is yes, indicate which branch or branches of		Executive	Legislative	I —	child of a lot	-		:	\$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Colangelo	Moira				Cash Money	Personal of X Credit/De		1477		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
23 Gaxton Rd		Stamford	l		СТ	06905-1306	0	9/22/2009	)	
Principal Occupation Consultant		Name of Er	nployer		•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	n ID#	Amount of
Brennan	Edward			Р	Cash Money	y Order X Credit/De		1479		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
38 Kings Hwy N		Westport			СТ	06880-3001	0	9/22/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution assoc fundraising event listed in			Yes	
investment advisor		self				If yes, list Event #	n beetion .	х	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	n ID#	Amount of
Caissy	James				Cash Money	y Order X Credit/De		1480		Contribution
Residential Street Address		City			State	Zip Code	1	ate Received		
1903 Burr St		Fairfield			СТ	06824-1804	0	9/22/2009	)	
Principal Occupation  Commercial Real Estate		Name of Er Stratford	nployer i Development			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		outor a lobbyis		Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Î	t child of a lob Yes	•		\$3	75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Graziosi	Anzelmo				Cash Money	y Order X Credit/De		1481		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
447 Westover Rd		Stamford			СТ	06902-1923	0	9/22/2009	)	
Principal Occupation Attorney		Name of Er Law Office	nployer ces of Anzelmo Grazi	iosi		Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	tions 50.00	\$50.00
government the contract is with:	Ш	Executive	Legislative	<u> </u>	res X	No				

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name Goldman	First Name Hillel		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 148	ribution ID#	Amount of Contribution
Residential Street Address 32 Laura Dr		City Danbury		State CT	Zip Code 06811-3293	Date Rec		
Principal Occupation Attorney		Name of Employer Mix & Goldman, LLC			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	stributions \$250.00	\$250.00
Last Name Terenzi	First Name Peter		MI R	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 148	ribution ID #	Amount of Contribution
Residential Street Address 42 Laurel Wood Dr		City Deep River		State CT	Zip Code 06417-1513	Date Reco		
Principal Occupation N/A		Name of Employer N/A		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	stributions \$375.00	\$375.00
Last Name Kehoe	First Name Tom		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 148	ribution ID#	Amount of Contribution
Residential Street Address 53 Acorn Ridge Rd		City South Glastonbury		State CT	Zip Code 06073-3501	Date Rec 09/22/		
Principal Occupation Attorney		Name of Employer Alstom Power Inc.			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggregate Co	stributions \$50.00	\$50.00
Last Name Banker	First Name Pravin		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 148	ribution ID #	Amount of Contribution
Residential Street Address 477 Lake Ave		City Greenwich		State CT	Zip Code 06830-3830	Date Reco		
Principal Occupation Corporate Finance		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	stributions \$50.00	\$50.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Hawks-Ladds	Joshua				Cash Money	y Order		1487		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
100 Shoddy Mill Rd		Bolton			СТ	06043-7841	0	9/22/2009	)	
Principal Occupation Attorney		Name of Er Pullman	nployer & Comley LLC			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	tions 575.00	\$75.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Dranginis	Anne				Cash Money	y Order Resonal C		1488		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
PO Box 39		Litchfield			СТ	06759-0039	0	9/22/2009	)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
Attorney		Rome Mo	cGuigan, PC			fundraising event listed in If yes, list Event #	Section .	J1?	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	tions 250.00	\$250.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Palmer	Donald			L	Cash Money	y Order X Credit/Del		1489		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
4 Alexis Dr		Bolton			СТ	06043-7843	0	9/22/2009	)	
Principal Occupation  Quality Engineer		Name of Er Alstom F				Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	•		\$	25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Elkow	Pamela			K	Cash Money	y Order X Credit/Del		1490		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
55 Gallows Hill Rd		Redding			СТ	06896-1406	0	9/22/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
Attorney		Robinsor	n & Cole, LLP	_		fundraising event listed in If yes, list Event #	section.	x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	child of a lob	-		\$3	75.00	\$375.00
government the contract is with:		LACCUUVE	Legisiative			110	1			

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009
		B. Itemized Contribu	ıtions fron	n Individu	uals			
Last Name	First Name		MI	Method of	contribution:	Contrib	oution ID #	Amount of
Blank	Terry			Cash Money	y Order X Credit/Deb	1491		Contribution
Residential Street Address		City		State	Zip Code	Date Recei	ved	
735 Post Rd		Scarsdale		NY	10583-5009	09/22/2	009	1
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
Dentist		self			If yes, list Event #	Section 71 :	x No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		outor a lobbyis	-	Aggregate Cont	ributions	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		t child of a lob	-		\$50.00	\$50.00
Last Name	First Name		MI	Method of	contribution:		oution ID #	Amount of
Kornreich	Eva		S	Cash Money	y Order X Credit/Deb	1492		Contribution
Residential Street Address		City		State	Zip Code	Date Recei		
46 Strathmore Ln		Westport		СТ	06880-4734	09/22/2	009	1
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
Dance co. director		self			If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	outor a lobbyis	st, spouse, or	Aggregate Cont	ributions	†
state contractor? Is yes, indicate which branch or branches of			-	t child of a lob	•		\$100.00	\$100.00
government the contract is with:		Executive Legislative	<u> </u>	Yes X	No			1
Last Name	First Name		MI	Method of Cash	contribution:		oution ID #	Amount of
Ramos	Maryann	1			y Order X Credit/Deb	1544		Contribution
Residential Street Address		City		State	Zip Code	Date Recei		
35 Homestead Rd		Greenwich		СТ	06831-4222	09/22/2	009	1
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes	
physician assistant		Bridgeport Hospital			If yes, list Event #		x No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	outor a lobbyis	st, spouse, or	Aggregate Cont	ributions	†
state contractor? Is yes, indicate which branch or branches of				t child of a lob	•		\$15.00	\$15.00
government the contract is with:		Executive Legislative		Yes X		1		1
Last Name Barbier	First Name Bury		MI	Method of Cash	contribution:		oution ID #	Amount of
Dai Diei	Bury				y Order X Credit/Deb	1545		Contribution
Residential Street Address	•	City	•	State	Zip Code	Date Recei	ved	
27 Orlando Ave		Stamford		СТ	06902-6409	09/22/2	009	
Principal Occupation		Name of Employer			Is this contribution associa		Yes	
Printer Support		United Printer Technology	Services		fundraising event listed in If yes, list Event #	Section J1?	x No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contril	outor a lobbyis	1	A : C :	-:14:	1
state contractor?	o. prospective	Yes X No		t child of a lob	obyist?	Aggregate Cont	\$100.00	\$100.00
Is yes, indicate which branch or branches of		Executive Legislative		Yes X	No		,	

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Lahey	Robert				Cash Money	Personal C  V Order  X Credit/Del		1546		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11924 W Forest Hill Blvd # 22-415	5	Wellingto	n		FL	33414-6256	0	9/22/2009	1	
Principal Occupation Investor		Name of Er Self	nployer		•	Is this contribution associ- fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribut \$.	tions 20.00	\$20.00
Last Name	First Name			MI	Method of	contribution:	•	Contribution	n ID#	Amount of
Heaphy	Eileen			М	Cash Money	Personal C  V Order  X Credit/Del		1475		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
247 Hamilton Ave Apt 4		Stamford	<u> </u>		СТ	06902-3484	0	9/22/2009	١	
Principal Occupation		Name of Er	mployer			Is this contribution associ- fundraising event listed in			Yes	
retired		none				If yes, list Event #	section .	x	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribut \$1	tions 75.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Costello	Colin			J	Cash Money	Personal C  y Order X Credit/Del		1531		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
229 Davenport Dr		Stamford			СТ	06902-7711	0	9/22/2009	1	
Principal Occupation		Name of Er	mployer			Is this contribution associ- fundraising event listed in			Yes	
self employed		self				If yes, list Event #		х	No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	-		\$10	00.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Jervis	William			E	Cash Money	Personal C  X Credit/Del		1535		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
75 Shennecossett Pkwy		Groton			СТ	06340	0	9/22/2009		
Principal Occupation		Name of Er	mployer			Is this contribution associ- fundraising event listed in			Yes	
N/A		N/A				If yes, list Event #	. Section :	х	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$!	50.00	\$50.00
government the contract is with:		LACCULIVE	Legislative	1	<u>ت</u>	-10	I			

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILIN	G DUE DATE	
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009	
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Darris	First Name Cranston		MI	Cash	contribution:	heck 153	ribution ID #	Amount of Contribution	
Residential Street Address 91 Strawberry Hill Ave Apt 325		City Stamford		State CT	y Order x Credit/Deb Zip Code 06902-2746	Date Rec 09/22/		-	
Principal Occupation operations improvement consultant		Name of Employer Darris Consulting			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	sntributions \$115.00	\$15.00	
Last Name Matarasso	First Name Ernest		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 147	ribution ID #	Amount of Contribution	
Residential Street Address 17 Buckingham Ct		City Stamford		State CT	Zip Code 06902-8307	Date Rec 09/22/			
Principal Occupation self		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00	
Last Name Matarasso	First Name Corinne		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 147	ribution ID #	Amount of Contribution	
Residential Street Address 17 Buckingham Ct	•	City Stamford		State CT	Zip Code 06902-8307	Date Rec 09/22/			
Principal Occupation Stamford Board Of Education		Name of Employer Teacher			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$100.00	\$100.00	
Last Name Hartt	First Name Robert		MI W	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 147	ribution ID #	Amount of Contribution	
Residential Street Address 17 Rose Hill Rd		City Southport		State CT	Zip Code 06890-1336	Date Rec 09/22/			
Principal Occupation real estate executive		Name of Employer Building and Land Technolog	ЭУ	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	sntributions \$150.00	\$50.00	

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILIN	G DUE DATE	
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009	
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Gaffney	First Name Maureen		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 15	ntribution ID#	Amount of Contribution	
Residential Street Address 500 Prospect St Apt 4D		City New Haven		State CT	Zip Code 06511-2166	Date Re			
Principal Occupation Editor/Consultant		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$30.00	\$15.00	
Last Name Anspach	First Name Deidre		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 14	ntribution ID#	Amount of Contribution	
Residential Street Address 948 Valley Rd		City New Canaan		State CT	Zip Code 06840-2815	Date Re			
Principal Occupation  Nurse		Name of Employer City of Stamford		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$200.00	\$100.00	
Last Name Mody	First Name Kabir		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 15	ntribution ID#	Amount of Contribution	
Residential Street Address 85 Camp Ave Apt 6E		City Stamford		State CT	Zip Code 06907-1835	Date Re			
Principal Occupation Physician		Name of Employer Norwalk Hospital		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$100.00	\$50.00	
Last Name Yantorno	First Name Barbara		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 15	ntribution ID#	Amount of Contribution	
Residential Street Address 86 Middlesex Rd		City Darien		State CT	Zip Code 06820-3722	Date Re 09/22			
Principal Occupation social worker		Name of Employer City of stamford			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$125.00	\$25.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING D										
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contribut	tions fron	ı Individu	ıals		•			
Last Name Kelley	First Name James		MI E	Cash	contribution:    X   Personal Cl	heck 1526	ution ID#	Amount of Contribution		
Residential Street Address 26 Coopers Pond Rd		City Stamford		State CT	Zip Code 06905-3008	Date Receive 09/23/20				
Principal Occupation firefighter		Name of Employer City of Stamford			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	sibutions \$150.00	\$50.00		
Last Name Vollmer	First Name Edward		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1523	ution ID#	Amount of Contribution		
Residential Street Address 322 Hoyt Farm Rd		City New Canaan		State CT	Zip Code 06840-5044	Date Receive 09/23/20				
Principal Occupation Retired		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$50.00		
Last Name Welch	First Name Mackenzie	e	MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 1519	ution ID#	Amount of Contribution		
Residential Street Address 224 Dolphin Cv Quay		City Stamford		State CT	Zip Code 06902-7752	Date Receive 09/23/20				
Principal Occupation student		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	stantions \$100.00	\$100.00		
Last Name Steinmetz	First Name Shirley		MI W	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 1530	ution ID#	Amount of Contribution		
Residential Street Address 375 Brimfield Rd		City Wethersfield		State CT	Zip Code 06109-3203	Date Receive 09/23/20				
Principal Occupation NA		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$50.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							1	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(	Origina	al 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals		•		
Last Name Calyanis	First Name Lisa		MI K	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1493	ID#	Amount of Contribution
Residential Street Address 11 Bickford Ln		City New Canaan		State CT	Zip Code 06840-6104		te Received /23/2009		
Principal Occupation secretary		Name of Employer Controlled Temperatures			Is this contribution associa fundraising event listed in If yes, list Event # 092		? <u> </u>		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 5.00	\$375.00
Last Name Stratoudakis	First Name Christoph	er	MI P	Cash	contribution:  X Personal Cl y Order Credit/Deb	ı	Contribution 1494	ID#	Amount of Contribution
Residential Street Address 117 Knox Rd		City Stamford		State CT	Zip Code 06907-1512		te Received /23/2009		
Principal Occupation sheet metal mechanic		Name of Employer Controlled Temperatures, In	c.		Is this contribution associa fundraising event listed in If yes, list Event # 092		? <u> </u>		L
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$250.00
Last Name Ganino	First Name Richard		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1495	ID#	Amount of Contribution
Residential Street Address 44 E Cross Rd		City Stamford		State CT	Zip Code 06907-1105		te Received /23/2009		
Principal Occupation service manager		Name of Employer Controlled Temperatures, In	c.		Is this contribution associa fundraising event listed in If yes, list Event # 092				ı
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$250.00
Last Name Calyanis	First Name Maria		MI A	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1496	ID#	Amount of Contribution
Residential Street Address 1325 Hope St		City Stamford		State CT	Zip Code 06907-1401		te Received /23/2009		
Principal Occupation realtor		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1	? <u> </u>		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$250.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons from	ı Individ	uals				
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Heverin	Kristan				Cash Mone	y Order X Personal C		1497		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
20 Cowan Ave		Stamford			СТ	06906-2407		9/23/200	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1.	Yes	
student		n/a		_		If yes, list Event # 09	222009	DA L	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative			No		\$	375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Heverin	Mary Jo				Cash Mone	y Order X Personal C		1502		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
20 Cowan Ave		Stamford			СТ	06906-2407	0	9/23/200	9	
Principal Occupation		Name of En	mployer			Is this contribution associ fundraising event listed in		1.7	Yes	
n/a		n/a				1	222009		No	
Is contributor a principal of a state contractor	or prospective	l	Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 m	child of a lot	obyist? No		\$	375.00	\$375.00
government the contract is with:	I Firmt Name	Executive	Legislative	I <sub>MI</sub>			<u> </u>	I		
Last Name Dermer	First Name Jo Ann			MI	Cash	contribution:  X Personal (	Check	Contributi	on ID#	Amount of Contribution
					Mone	y Order Credit/De	bit Card	1498		
Residential Street Address		City			State	Zip Code		ate Received		
9 Old North Stamford Rd Apt 35H		Stamford			СТ	06905-3929		9/23/200		
Principal Occupation information requested		Name of Er	nployer ion requested			Is this contribution associ fundraising event listed in		J1?	Yes	
illioittiation requested		imormac	ion requested	_		If yes, list Event # 09	222009	<u> </u>	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of	П	Executive	Legislative	1 —	child of a lot	No		\$	375.00	\$375.00
government the contract is with:  Last Name	First Name			MI	1	contribution:	<u> </u>	Contributi	on ID#	
Moncrieffe	Maxine				Cash	X Personal (	Check	1499	OII ID#	Amount of Contribution
						y Order Credit/De				
Residential Street Address 68 Melrose Ave		City Bridgepoi	rt		State	Zip Code 06605-3056		Date Received		
Principal Occupation		Name of Er			-	Is this contribution associ			Yes	•
information requested			ion requested			fundraising event listed in		J1?	No	
				1		If yes, list Event # 09	<u> </u>	<u>,,,</u>		
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contrib		#27F 00
Is yes, indicate which branch or branches of		Executive	Legislative	Y	res x	No	1	\$.	375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							1	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(	Origina	nl 10/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name Chirillo	First Name Lisa		MI	Cash	contribution:    X   Personal Cl y Order		Contribution	ID#	Amount of Contribution
Residential Street Address 34 Deep Spring Ln		City Stamford		State CT	Zip Code 06907-1101		te Received /23/2009		
Principal Occupation controller		Name of Employer Viking Construction			Is this contribution associa fundraising event listed in If yes, list Event # 092		11.		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 5.00	\$375.00
Last Name Canaan	First Name Emil		MI A	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 264 Dayton Rd		City Trumbull		State CT	Zip Code 06611-1802		te Received /23/2009		
Principal Occupation Project Manager		Name of Employer Viking Construction			Is this contribution associa fundraising event listed in If yes, list Event # 092		11.		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 5.00	\$375.00
Last Name Keller	First Name Robert		MI D	Cash	contribution:    X   Personal Cl		Contribution	ID#	Amount of Contribution
Residential Street Address 130 Joyce Ct		City Milford		State CT	Zip Code 06461-1817		te Received /23/2009		
Principal Occupation yard foreman		Name of Employer Viking Construction			Is this contribution associa fundraising event listed in If yes, list Event # 092		11.		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	sate Contributio	ons 5.00	\$375.00
Last Name Stenger	First Name Gail		MI V	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 72 Coachlight Sq		City Bridgeport		State CT	Zip Code 06606		te Received /23/2009		
Principal Occupation retired		Name of Employer n/a			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1	1 1		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 5.00	\$375.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Shuster	Ну				Cash Money	= =	nal Check /Debit Card	1505		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		Date Received		
1387 Seaview Ave		Bridgepo	rt		CT	06607-1069		09/23/2009		
Principal Occupation		Name of Er	mployer			Is this contribution as:	sociated with	a x	Yes	
project manager		Viking C	onstruction			fundraising event liste If yes, list Event #	ed in Section 09222009	J1?	No	
To contributor a minimal of a state contractor	or prospective		Yes X No	Tt-il-			1			
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggr	egate Contribu	itions 375.00	\$375.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res X	No		Ψ-		ψ373.00
Last Name	First Name			MI		contribution:		Contributio	on ID #	Amount of
Glysing-Jensen	Claire				Cash Money	=	nal Check /Debit Card	1506		Contribution
Residential Street Address		City		•	State	Zip Code	I	Date Received		
65 Wolfpit Ave # 1C		Norwalk			СТ	06851-4257	(	09/23/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution as		1^	Yes	
teacher		Diocese	of Bridgeport			fundraising event liste If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggr	egate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	375.00	\$375.00
government the contract is with:		Executive	Legislative	+-	res X					<u> </u>
Last Name Glysing-Jensen	First Name Jesper			MI	Method of Cash	contribution:	nal Check	Contributio	on ID #	Amount of Contribution
Glysing sensen	эсэрсі				_	y Order Credit	/Debit Card	1518		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
65 Wolfpit Ave # 1C		Norwalk			СТ	06851-4257	(	09/23/2009	9	
Principal Occupation		Name of Er				Is this contribution as: fundraising event liste		1a x	Yes	
estimator		VIKING C	onstruction			If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggr	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of				1 m	child of a lob	•		\$2	275.00	\$275.00
government the contract is with:		Executive	Legislative	+ -	1			1		<u> </u>
Last Name Oliveira	First Name John			MI A	Method of Cash	contribution:	nal Check	Contributio	on ID #	Amount of Contribution
	30			,	_	y Order Credit	/Debit Card	1507		Contribution
Residential Street Address		City			State	Zip Code	I	Date Received		
97 Granby St		Waterbur	У		СТ	06708-4526	(	09/23/2009	9	
Principal Occupation		Name of Er				Is this contribution as: fundraising event liste		1^	Yes	
electrician		Delmar I	EIECTFIC			If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggr	egate Contribu	itions	İ
state contractor? Is yes, indicate which branch or branches of		<b>.</b>		dependent	child of a lob	-		-	375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative		res X	NO				1

		I. N	IONETARY RE	CEIPTS	S (Sectio	on A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	Τ)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Negron	Jose			А	Cash Money	y Order X Personal Credit/Do		1508		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
41 Hubbard Ave		Stamford	i		СТ	06905-4806	c	9/23/2009	9	
Principal Occupation		Name of E	mployer		•	Is this contribution assoc	iated with	a <b>x</b>	Yes	Ī
electrician		Delmar I	Electric			fundraising event listed if If yes, list Event # 09	n Section . 9222009	J1?	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No	Is contrib	utor a lobbyis	st spouse or	1 4 0 0 0 0	egate Contribu	utiona	†
state contractor? Is yes, indicate which branch or branches of	_		les livo	1	child of a lob	obyist?	Aggit	-	375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative	L Y	res X	No				
Last Name	First Name			MI		contribution:	Ch1-	Contribution	on ID#	Amount of
Okon	Jerry				Cash Money	y Order Credit/De		1509		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
25 Charles St		Plantsvill	e		СТ	06479-1905	C	9/23/2009	9	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed it		1^	Yes	
electrician		Delmar I	Electrical			If yes, list Event # 09			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No	1	utor a lobbyis	-	Aggre	egate Contribu	utions	Ī
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$3	375.00	\$375.00
government the contract is with:	<u> </u>	Executive	Legislative	<del>                                     </del>	I			1		<u> </u>
Last Name Hart	First Name Robert			MI F	Method of Cash	contribution:  X Personal	Check	Contribution	on ID #	Amount of Contribution
					Money	y Order Credit/De	ebit Card	1510		
Residential Street Address		City			State	Zip Code		Date Received		
96 Howard Ave		New Hav	en		СТ	06519-2811	C	09/23/2009	9	ļ
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed it		J1?	Yes	
Insurance Broker		self				If yes, list Event # 09			No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No	1	utor a lobbyis	-	Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$3	375.00	\$375.00
government the contract is with:	<u> </u>	Executive	Legislative	<del>                                     </del>	I			T		<u> </u>
Last Name Naber	First Name Awni			MI M	Method of Cash	contribution:  X Personal	Check	Contribution	on ID #	Amount of Contribution
					Money	y Order Credit/De	ebit Card	1511		
Residential Street Address		City			State	Zip Code	1	Date Received		
1 Mystic Dr		Ossining			NY	10562-1964		09/23/2009	9	
Principal Occupation		Name of E				Is this contribution assoc fundraising event listed i		1^	Yes	
president/CEO		Naber El	IECU IC			If yes, list Event # 09			No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No	1	utor a lobbyis	-	Aggre	egate Contribu	utions	Ì
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	child of a lob	-		\$3	375.00	\$375.00
government the contract is with:	ш	Executive	Legisiative	'		INU				<u> </u>

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING D										
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contributi	ions fron	ı Individu	ıals		•			
Last Name D'Errico	First Name Carolyn		MI M	Cash	contribution:    X   Personal C	heck 1512	bution ID#	Amount of Contribution		
Residential Street Address 90 Howard Ave		City New Haven		State CT	Zip Code 06519-2811	Date Recei				
Principal Occupation realtor		Name of Employer Realty World Clayton		-	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	\$375.00	\$375.00		
Last Name Dickman	First Name Christoph	er	MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 1513	bution ID#	Amount of Contribution		
Residential Street Address 34 Carousel Dr		City Portland		State CT	Zip Code 06480-1257	Date Recei				
Principal Occupation manager		Name of Employer Cisco LLC		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Fernando C. De Aguiar	First Name Jose		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 1514	bution ID #	Amount of Contribution		
Residential Street Address 14 Brentwood Rd		City New Milford		State CT	Zip Code 06776-2604	Date Recei				
Principal Occupation electrician		Name of Employer Delmar Electric			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Van Scoy	First Name Lavette		MI P	Cash	contribution:  X Personal City Order Credit/Deb	heck 1515	bution ID#	Amount of Contribution		
Residential Street Address 60 Sequoia Rd		City Bridgeport		State CT	Zip Code 06606-1337	Date Recei				
Principal Occupation HVAC		Name of Employer Controlled Temperatures			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$250.00	\$250.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING DU										
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contributi	ions from	Individu	ıals		-			
Last Name Cackowski	First Name Stanley		MI J	Cash	contribution:    X   Personal C	heck 1516	ution ID#	Amount of Contribution		
Residential Street Address 8 Pepperidge Rd		City Trumbull		State CT	Zip Code 06611-5308	Date Receiv 09/23/20				
Principal Occupation sales		Name of Employer Controlled Temperatures Inc			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	\$250.00	\$250.00		
Last Name Pasko	First Name Lawrence		MI M	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 1517	ution ID#	Amount of Contribution		
Residential Street Address 83 Franklin St		City Danbury		State CT	Zip Code 06810-5402	Date Receiv 09/23/20				
Principal Occupation  HVAC tech		Name of Employer Controlled Temperatures		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	ibutions \$250.00	\$250.00		
Last Name Montello	First Name Steven		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 1520	ution ID#	Amount of Contribution		
Residential Street Address 445 Roxbury Rd		City Stamford		State CT	Zip Code 06902-1123	Date Receiv 09/23/20				
Principal Occupation real estate		Name of Employer Property Group			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Fulton	First Name William		MI F	Cash	contribution:  X Personal City Order Credit/Deb	heck 1521	ution ID#	Amount of Contribution		
Residential Street Address 145 W Haviland Ln		City Stamford		State CT	Zip Code 06903-3302	Date Receiv 09/23/20				
Principal Occupation  consultant		Name of Employer self	_	•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		

		I. MONETA	ARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								I	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)							(	Origina	al 10/13/2009
		B. Itemized C	Contributio	ons from	Individu	ıals		<u> </u>		
Last Name Hekking	First Name Darren			MI M	Cash	contribution:    X   Personal C		Contribution 1	ID#	Amount of Contribution
Residential Street Address 50 Forest St Apt 1018		City Stamford			State CT	Zip Code 06901-1871		Pate Received 19/23/2009		
Principal Occupation account manager		Name of Employer Opentext				Is this contribution associ fundraising event listed in If yes, list Event # 09	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contributio \$50	ons 0.00	\$50.00
Last Name Pascarella	First Name Giovanna			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 1	ID#	Amount of Contribution
Residential Street Address 102 Northwood Ln		City Stamford			State CT	Zip Code 06903-4333		Pate Received		
Principal Occupation none		Name of Employer none				Is this contribution associ fundraising event listed in If yes, list Event # 09				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contributio \$50	ons 0.00	\$50.00
Last Name Pascarella	First Name Pasquale			MI	Cash	contribution:    X   Personal C		Contribution I	ID#	Amount of Contribution
Residential Street Address 102 Northwood Ln		City Stamford			State CT	Zip Code 06903-4333		Pate Received		
Principal Occupation executive chef/owner		Name of Employer Harbor Drive LLC			•	Is this contribution associ fundraising event listed in If yes, list Event # 09	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributio \$50	ons 0.00	\$50.00
Last Name Tepper	First Name Jay			MI	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution 1	ID#	Amount of Contribution
Residential Street Address 38 Dads Ln		City Stamford			State CT	Zip Code 06903-2324		Pate Received 19/23/2009		
Principal Occupation  Export		Name of Employer Self-Employed				Is this contribution associ fundraising event listed in If yes, list Event # 09				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributio \$50	ons 0.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						О	Origina	1 10/13/2009
		B. Itemized Contribut	tions fron	ı Individu	ıals				
Last Name Miller	First Name Daniel		MI	Cash	contribution:    X   Personal C y Order	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 50 Glenbrook Rd Apt 14E		City Stamford		State CT	Zip Code 06902-2952		Received 23/2009		
Principal Occupation Financial Services		Name of Employer Gabelli & Co.		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution \$50		\$50.00
Last Name Van Scoy	First Name Michael		MI J	Cash	contribution:  X Personal C y Order Credit/Deb	heck	Contribution II 1529	D#	Amount of Contribution
Residential Street Address 273 Derby Ave Unit 505		City Derby		State CT	Zip Code 06418-2086		Received 23/2009		
Principal Occupation sales manager		Name of Employer Controlled Temperatures, LI	LC	•	Is this contribution association fundraising event listed in If yes, list Event # 092		X Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution \$250		\$250.00
Last Name Chakravarti	First Name Prakash		MI	Cash	contribution:  Personal C y Order X Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 184 Idlewood Dr		City Stamford		State CT	Zip Code 06905-2409		Received 23/2009		
Principal Occupation ENGINEER		Name of Employer CITY OF STAMFORD			Is this contribution association fundraising event listed in If yes, list Event # 092		X Y		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution \$100		\$100.00
Last Name Dallett	First Name Athenaide	e	MI	Cash	contribution:  Personal C y Order X Credit/Deb	heck	Contribution II 1534	D#	Amount of Contribution
Residential Street Address PO Box 2006		City Kent		State CT	Zip Code 06757-0640		Received 23/2009		
Principal Occupation teacher		Name of Employer Kent School		•	Is this contribution associa fundraising event listed in If yes, list Event #		X N	es lo	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution \$25		\$25.00

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ons from	ı Individu	ıals				
Last Name Masanotti	First Name Peter			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 48 Lakeside Rd		City Morris			State CT	Zip Code 06763-1709		Date Received		
Principal Occupation electrician		Name of En Delmar E				Is this contribution associ fundraising event listed in If yes, list Event # 09		<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es X	byist?	Aggre	egate Contrib	ations 375.00	\$375.00
Last Name Jackson	First Name Bruce			MI	Cash	contribution: Personal ( y Order X Credit/De		Contributi 1540	on ID#	Amount of Contribution
Residential Street Address 8 Westminster Ct		City Milford			State CT	Zip Code 06461-1619		Date Received 19/24/200		
Principal Occupation professional		Name of En Bishop, J	nployer Jackson Kelly LLC			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Perri	First Name Carmine			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 157 1/2 Kings Hwy Unit N		City Milford			State CT	Zip Code 06460-8068		Date Received		
Principal Occupation attorney		Name of En Bishop, J	nployer Jackson, Kelly, LLC			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	bbyist?	Aggre	egate Contrib	stions \$75.00	\$75.00
Last Name Johnston	First Name Michael			MI L	Cash	contribution:  Personal ( y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 11 Ambler Ln		City Wilton			State CT	Zip Code 06897-2701		Date Received 19/24/200		
Principal Occupation CEO		Name of En United W	nployer Vay of Western Conno	ecticut	•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	ations \$25.00	\$25.00

		I. MONETARY R	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Dan Malloy For Connecticut (C	T)						C	Origina	1 10/13/2009
		B. Itemized Contribu	tions fron	ı Individu	ıals		•		
Last Name Schwartz	First Name Isidore		MI	Cash	contribution:    X   Personal C	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 107 Columbus Ave		City Niantic		State CT	Zip Code 06357-3138		e Received /24/2009		
Principal Occupation N/A		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		, <b>X</b> Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$25	ns 5.00	\$25.00
Last Name Hicks	First Name Gerald		MI D	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 85 Shore Rd		City Waterford		State CT	Zip Code 06385-3630		e Received /24/2009		
Principal Occupation chamber planning		Name of Employer Chamber of Commerce			Is this contribution associa fundraising event listed in If yes, list Event # 092		? X Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$50	ns ).00	\$50.00
Last Name Levin	First Name Lenore		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 7 Admiral Dr		City New London		State CT	Zip Code 06320-4201		e Received /24/2009		
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event # 092		1 1		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$50	ns 0.00	\$50.00
Last Name Francis	First Name Kristen		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution II	D#	Amount of Contribution
Residential Street Address 8 Shadbush Dr		City Colchester		State CT	Zip Code 06415-1948		e Received /24/2009		
Principal Occupation administrative		Name of Employer Manpower		•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	1 1		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$50	ns ).00	\$50.00

		I. N	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Gibbs	Denison			Н	Cash Money	y Order X Personal C		1553		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
236 Harland Rd		Norwich			СТ	06360-1842	0	9/24/2009	9	
Principal Occupation retired		Name of Er	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 09		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob	byist?	Aggre	egate Contribu \$	tions 550.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Рорр	Dennis			L	X Cash Money	y Order Personal C		1555	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
41 Cottage St		Groton			СТ	06340-3633	0	9/24/2009	9	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ		1^	Yes	
Mayor		City of G	Groton			fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$	tions 550.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Satti	William			L	Cash Money	y Order Personal C		1556		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
162 Gardner Ave		New Lone	don		СТ	06320-3054	0	9/24/2009	)	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		a x	Yes	
Director		Mashant	ucket Peqout Tribal	Nation		If yes, list Event # 09			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of			Legislative	1 ~	child of a lob	•		\$1	.00.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	I			1		
Last Name Bates	First Name Timothy			MI D	Method of Cash	contribution:	Check	Contributio	on ID #	Amount of Contribution
						y Order Credit/Del	bit Card	1557		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
65 Front St		Groton			СТ	06340-5715	0	9/24/2009	9	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		1^	Yes	
Attorney		Robinsor	n & Cole			If yes, list Event # 09.			No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		E	Tuesday.	dependent	child of a lob	-		\$1	.00.00	\$100.00
government the contract is with:	ᆜ	Executive	Legislative	Т п,	- CS	INO	1			

		I. MC	ONETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Stanley	First Name William			MI B	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 17 Meadow Ln		City Norwich			State CT	Zip Code 06360-5240		ate Received		
Principal Occupation retired		Name of Empi retired	loyer	_	-	Is this contribution associ fundraising event listed in If yes, list Event # 09		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Levine	First Name Sandra			MI M	Cash	contribution:    X   Personal ( y Order   Credit/De		Contributi 1559	on ID#	Amount of Contribution
Residential Street Address 186 Jerry Browne Rd Unit 3508		City Mystic			State CT	Zip Code 06355-4011		ate Received		
Principal Occupation retired		Name of Emp	loyer			Is this contribution associ fundraising event listed in If yes, list Event # 09		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Wildman	First Name William			MI R	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 58 Valley View Dr		City Waterbury			State CT	Zip Code 06708-4827		eate Received		
Principal Occupation carpet sales		Name of Empl self	loyer	_	•	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Henry	First Name Robert			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 1561	on ID#	Amount of Contribution
Residential Street Address 56 Sound Beach Ave		City Old Greenw	vich		State CT	Zip Code 06870-1416		ate Received		
Principal Occupation manager		Name of Emp	-		•	Is this contribution associ fundraising event listed in If yes, list Event # 09	n Section J	11? E	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemize	ed Contribution	ons from	Individu	ıals				
Last Name Moser	First Name Irene			MI	Cash	contribution:  X Personal of Credit/De		Contribution 1562	on ID#	Amount of Contribution
Residential Street Address 123 Downs Ave		City Stamford			State CT	Zip Code 06902-7802		ate Received		
Principal Occupation project manager		Name of Employer MXenergy				Is this contribution assoc fundraising event listed i If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ntions	\$100.00
Last Name Lang	First Name James			MI	Cash	contribution: Personal of the property of the		Contribution 1563	on ID#	Amount of Contribution
Residential Street Address 98A Black Rock Tpke		City Redding			State CT	Zip Code 06896-3027		ate Received 9/24/2009	9	
Principal Occupation retired		Name of Employer retired				Is this contribution assoc fundraising event listed i  If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive 1	ves X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Naik	First Name Shailesh			MI R	Cash	contribution: Personal of the property of the		Contribution 1564	on ID#	Amount of Contribution
Residential Street Address 84 Nelson Ave		City Harrison			State NY	Zip Code 10528-2934		ate Received		
Principal Occupation president		Name of Employer Charles Manga	anaro			Is this contribution assoc fundraising event listed i  If yes, list Event # 09	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	res X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu	tions \$75.00	\$75.00
Last Name Reynolds	First Name Joan			MI T	Cash	contribution:  X Personal of the Credit/December 2 Credit/December		Contribution 1566	on ID #	Amount of Contribution
Residential Street Address 23 Idlewood		City Bethel			State CT	Zip Code 06801-1471		ate Received 9/24/2009		
Principal Occupation Real Estate		Name of Employer Town of Bethe	I			Is this contribution assoc fundraising event listed i If yes, list Event #		112	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	ves X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	tions 50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009
		B. Itemized Contributi	ions from	Individu	ıals		•	
Last Name	First Name		MI		contribution:		ntribution ID#	Amount of
Eisenlohr	Brett			Cash Money	Personal Ch y Order X Credit/Debi	15	67	Contribution
Residential Street Address		City		State	Zip Code	Date Re		
336 Huckleberry Hill Rd		Avon		СТ	06001-3104	09/24		4
Principal Occupation  Environmental Conservation Police	9	Name of Employer  CT DEP			Is this contribution associate fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$100.00	\$100.00
Last Name McBride	First Name Scott		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 15	ntribution ID #	Amount of Contribution
Residential Street Address 211 Beacon St		City Newington	•	State CT	Zip Code 06111-4707	Date Re		
Principal Occupation sales		Name of Employer mcbride carpet		•	Is this contribution associate fundraising event listed in the state of the state o		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate C	Contributions \$25.00	\$25.00
Last Name Freitas	First Name Joseph		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 15	ntribution ID #	Amount of Contribution
Residential Street Address 12 Crest Rd	•	City Norwalk	•	State CT	Zip Code 06853-1207	Date Re		
Principal Occupation writer		Name of Employer self			Is this contribution associate fundraising event listed in the state of the state o		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$15.00	\$15.00
Last Name Saxena	First Name Renu		MI P	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck 15	ntribution ID #	Amount of Contribution
Residential Street Address 73 Parry Ct		City Stamford		State CT	Zip Code 06907-1018	Date Re	cceived /2009	
Principal Occupation Banker		Name of Employer Unemployed			Is this contribution associal fundraising event listed in 1 If yes, list Event # 092		X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	Contributions \$100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contributi	ions from	ı Individu	ıals		<u>'</u>	
Last Name Fulcher Anderson	First Name Josepine		MI	Cash	contribution: Personal C	heck 15	ntribution ID#	Amount of Contribution
Residential Street Address 102 Gillies Ln		City Norwalk		State CT	Zip Code 06854-1058	Date Re 09/24	eceived 1/2009	
Principal Occupation Librarian		Name of Employer Ferguson Library		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00
Last Name Dhingra	First Name Ravi		MI	Cash	contribution:  Personal Contribution:  y Order X Credit/Deb	heck 15	ntribution ID#	Amount of Contribution
Residential Street Address 295 Shady Hill Rd		City Fairfield		State CT	Zip Code 06824-7345	Date Re 09/24	eceived 1/2009	
Principal Occupation BUSINESS EXECUTIVE		Name of Employer SPECTRUM INC.			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$50.00	\$50.00
Last Name Sheridan	First Name Margaret		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 15	ntribution ID#	Amount of Contribution
Residential Street Address 318 Great Neck Rd		City Waterford		State CT	Zip Code 06385-3819	Date Re 09/24	eceived 1/2009	
Principal Occupation retired professor		Name of Employer Connecticut College			Is this contribution associal fundraising event listed in If yes, list Event # 092		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$250.00	\$50.00
Last Name Lenkowsky	First Name Steven		MI	Cash	contribution: Personal Contribution:  y Order X Credit/Deb	heck 15	ntribution ID#	Amount of Contribution
Residential Street Address 31 Cannon St		City Norwalk		State CT	Zip Code 06851-3825	Date Re 09/24	eceived 1/2009	
Principal Occupation Attorney		Name of Employer  Cadwalader, Wickersham & T	Taft LLP	•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$375.00	\$375.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals		•	
Last Name Negri	First Name Catherine	•	MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 153	ribution ID #	Amount of Contribution
Residential Street Address 2 Lanyard Ln		City Waterford		State CT	Zip Code 06385-3208	Date Rec 09/24/		
Principal Occupation retired		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	\$100.00	\$100.00
Last Name Holmberg	First Name Gerald		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 155	ribution ID #	Amount of Contribution
Residential Street Address 516 Mohegan Pkwy		City Quaker Hill		State CT	Zip Code 06375	Date Rec 09/24/		
Principal Occupation physicist		Name of Employer reitred		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$50.00	\$50.00
Last Name Morris	First Name Arline		MI	Cash	contribution:    X   Personal Cl	neck 154	ribution ID #	Amount of Contribution
Residential Street Address 16 Terrace Ave		City Niantic		State CT	Zip Code 06357-3513	Date Rec 09/24/		
Principal Occupation retired		Name of Employer n/a			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	spansions \$50.00	\$25.00
Last Name O'Hanlan	First Name Edward		MI V	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 160	ribution ID #	Amount of Contribution
Residential Street Address 453 Carter St		City New Canaan		State CT	Zip Code 06840-5015	Date Rec 09/25/		
Principal Occupation lawyer		Name of Employer Robinson & Cole, LLP			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	stributions \$275.00	\$275.00

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons from	Individ	uals				
Last Name Leydon	First Name Stacey			MI A	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 1616	on ID#	Amount of Contribution
Residential Street Address 222 Roxbury Rd		City Stamford	ı		State CT	Zip Code 06902-1222		ate Received 9/25/200		
Principal Occupation homemaker		Name of Er	nployer			Is this contribution association fundraising event listed in If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes		Aggre	gate Contribu	utions 150.00	\$100.00
Last Name Nichani	First Name Kavya			MI	Cash	contribution:  X Personal of the description of the		Contribution 1622	on ID#	Amount of Contribution
Residential Street Address 12 Hickory Dr # B		City Greenwic	ch		State CT	Zip Code 06831-4916		ate Received 9/25/200		
Principal Occupation n/a		Name of Er	nployer		•	Is this contribution associfundraising event listed in If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	-	Aggre	gate Contribu	utions 300.00	\$300.00
Last Name Ahuja	First Name Ravi			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 1624	on ID#	Amount of Contribution
Residential Street Address 296 Westover Rd		City Stamford	I		State CT	Zip Code 06902-1928		ate Received		
Principal Occupation Architect		Name of En	nployer sign Group, PC			Is this contribution associfundraising event listed in If yes, list Event # 09	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res		Aggre	gate Contribu	utions 150.00	\$50.00
Last Name Smith	First Name Michael			МІ	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 1574	on ID#	Amount of Contribution
Residential Street Address  1 Abbott Rd Apt 7		City Ellington			State CT	Zip Code 06029-3863		ate Received		
Principal Occupation carpenter		Name of Er Hemlock	nployer Construction		•	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	-	Aggre	gate Contribu	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contributi	ons fron	Individu	ıals		•			
Last Name Melvin	First Name Robert		MI S	Cash	contribution:    X   Personal C	heck 157	ribution ID#	Amount of Contribution		
Residential Street Address 23 Watson Dr		City West Simsbury		State CT	Zip Code 06092-2233	Date Rec 09/25/				
Principal Occupation attorney		Name of Employer Robinson & Cole LLP		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$50.00	\$50.00		
Last Name Greene	First Name David		MI R	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 157	ribution ID #	Amount of Contribution		
Residential Street Address 341 Great Swamp Rd		City Glastonbury		State CT	Zip Code 06033-1423	Date Rec 09/25/				
Principal Occupation attorney		Name of Employer Robinson & Cole LLP		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	shaributions \$375.00	\$375.00		
Last Name Guanci	First Name Matthew		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 157	ribution ID #	Amount of Contribution		
Residential Street Address 299 Farmcliff Dr		City Glastonbury		State CT	Zip Code 06033-4185	Date Rec 09/25/				
Principal Occupation attorney		Name of Employer Robinson & Cole LLP			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	shortributions \$100.00	\$100.00		
Last Name Maglio	First Name Michael		MI F	Cash	contribution:    X   Personal C	heck 157	ribution ID#	Amount of Contribution		
Residential Street Address 35 Leigh Gate Rd		City Glastonbury		State CT	Zip Code 06033-4174	Date Rec 09/25/				
Principal Occupation Attorney		Name of Employer Robinson & Cole, LLP			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	spansion on tributions \$200.00	\$200.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(	Origina	nl 10/13/2009
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Golden	First Name Michael		MI	Cash	contribution:    X   Personal Cl	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 29 Stoneleigh Close		City Scarsdale		State NY	Zip Code 10583-1527		e Received /25/2009		
Principal Occupation attorney		Name of Employer Robinson & Cole LLP		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		1 1		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggrega	ate Contribution \$375		\$375.00
Last Name Ray	First Name James		MI P	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 20 Rainbow Trl		City South Windsor		State CT	Zip Code 06074-2927		e Received /25/2009		
Principal Occupation lawyer		Name of Employer Robinson & Cole LLP		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		11.		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution \$100		\$100.00
Last Name Greco	First Name Kevin		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 119 Seir Hill Rd		City Wilton		State CT	Zip Code 06897-4208		e Received /25/2009		
Principal Occupation attorney		Name of Employer sandak hennessey & greco			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contribution \$100		\$100.00
Last Name Chimes	First Name Lewis		MI H	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 163 Ocean Dr E		City Stamford		State CT	Zip Code 06902-8118		e Received /25/2009		
Principal Occupation Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		? X	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution		\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Garrison	First Name Joseph		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 158	ribution ID #	Amount of Contribution		
Residential Street Address 405 Orange St		City New Haven		State CT	Zip Code 06511-6406	Date Reco				
Principal Occupation Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	stributions \$20.00	\$20.00		
Last Name Bhandary-Alexander	First Name Kavita		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 158	ribution ID #	Amount of Contribution		
Residential Street Address 72 Alden Ave		City New Haven		State CT	Zip Code 06515-2715	Date Reco				
Principal Occupation  Lawyer		Name of Employer Garrison et al			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	ntributions \$5.00	\$5.00		
Last Name Dematteis	First Name Linda		MI M	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 158	ribution ID #	Amount of Contribution		
Residential Street Address 10 Hickory Ct		City Wallingford		State CT	Zip Code 06492-4372	Date Reco				
Principal Occupation paralegal		Name of Employer Garrison, et al			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	ntributions \$5.00	\$5.00		
Last Name Poth	First Name Christoph	er	MI a	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 158	ribution ID #	Amount of Contribution		
Residential Street Address 12 Mansfield Pl		City Darien		State CT	Zip Code 06820-2814	Date Reco				
Principal Occupation real estate/insurance broker		Name of Employer middlesex financial company	, llc		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	ntributions \$50.00	\$50.00		

		I. N	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. It	emized Contributi	ions fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Mayglothling	Paul			J	Cash Money	Personal C  X Credit/Del		1587		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
78 Sabina Rd		Trumbull			СТ	06611-1246	0	9/25/2009	1	
Principal Occupation Clinical social worker		Name of Er Self	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	•	Contribution	n ID#	Amount of
Kelleher	William			J	Cash Money	y Order X Personal C		1588		Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
189 N Cedar Rd		Fairfield			СТ	06824-2832	0	9/25/2009	1	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^1	Yes	
Attorney		Robinso	n & Cole			fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$20	tions 00.00	\$200.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Lacouture	Peter			V	Cash Money	y Order X Personal C		1589		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
75 Summit Rd		Exeter			RI	02822-1809	0	9/25/2009	1	
Principal Occupation		Name of Er	mployer			Is this contribution associ		a <b>x</b>	Yes	
attorney		Robinsor	n & Cole LLP			fundraising event listed in  If yes, list Event # 09.			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of				I	child of a lob	*		-	00.00	\$200.00
government the contract is with:		Executive	Legislative	'	res x	No				
Last Name	First Name			MI		contribution:	"hook	Contribution	n ID#	Amount of
Clasen	Joseph			L	Cash Money	y Order Credit/Del		1590		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
99 Evergreen Ave		Bethpage	2		NY	11714-1530	0	9/25/2009	1	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^1	Yes	
attorney		Kobinsoi	n & Cole LLP			If yes, list Event # 09.			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribut	tions	ĺ
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	75.00	\$375.00
government the contract is with:	Ш	Executive	Legislative	L 1	res x	No				

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING											
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009	
		B. Itemized Co	ntributio	ns from	Individu	ials					
Last Name Enright	First Name Michael			MI R	Method of o	contribution:    X   Personal of Order		Contribution 1591	on ID#	Amount of Contribution	
Residential Street Address 168 Middle Haddam Rd		City Portland			State CT	Zip Code 06480-1702		ate Received	)		
Principal Occupation  Lawyer		Name of Employer Robinson & Cole				Is this contribution assoc fundraising event listed in If yes, list Event # 09			Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati			ttor a lobbyist child of a lob es	byist?	Aggre	egate Contribu \$1	tions .00.00	\$100.00	
Last Name Giamio	First Name Michael			MI S	Cash	contribution:    X   Personal of Credit/December   Credit/December		Contribution 1592	on ID#	Amount of Contribution	
Residential Street Address 32 Mill St		City Sherborn			State MA	Zip Code 01770-1272		ate Received 9/25/2009	)		
Principal Occupation attorney		Name of Employer Robinson & Cole LLP	)	·		Is this contribution assoc fundraising event listed in If yes, list Event # 09			Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati	<b>X</b> No		ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$3	tions 375.00	\$375.00	
Last Name Kehoe	First Name E. Christo	pher		MI	Cash	contribution:    X   Personal (		Contribution 1593	on ID#	Amount of Contribution	
Residential Street Address 80 Elm St		City Hingham			State MA	Zip Code 02043-2434		eate Received	)		
Principal Occupation attorney		Name of Employer Robinson & Cole LLP	•			Is this contribution assoc fundraising event listed in If yes, list Event # 09	n Section J		Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati		dependent	ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00	
Last Name Porter	First Name Kathleen			MI M	Method of o	contribution:    X   Personal of Credit/December 2   Credit/Decemb		Contribution 1594	on ID #	Amount of Contribution	
Residential Street Address 252 Harvard St		City Quincy			State MA	Zip Code 02170-2520		ate Received 9/25/2009	)		
Principal Occupation Attorney		Name of Employer Robinson & Cole LLP	)			Is this contribution assoc fundraising event listed if If yes, list Event # 09	n Section J		Yes No		
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati	X No	dependent	ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ons fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID #	Amount of
Lynch	John			В	Cash Money	=	onal Check lit/Debit Card	1595		Contribution
Residential Street Address		City			State	Zip Code	1	Date Received		
15 Clove Hill St		Wethersf	ield		СТ	06109-4005	(	09/25/2009	9	
Principal Occupation lawyer		Name of En Robinsor	nployer n & Cole, LLP			Is this contribution a fundraising event lis If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggr	egate Contribu	ations 375.00	\$375.00
government the contract is with:  Last Name	First Name			MI		contribution:		1	"	
Kane	John			Н	Cash	X Perso	onal Check lit/Debit Card	Contribution 1596	on ID#	Amount of Contribution
Residential Street Address		City		•	State	Zip Code	I	Date Received		
9 Tunxis Trl		Redding			СТ	06896-2508	(	09/25/2009	9	
Principal Occupation		Name of En	nployer		•	Is this contribution a		1^	Yes	
Attorney		Robinsor	n & Cole	_		fundraising event lis If yes, list Event #			No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggr	egate Contribu \$3	ations 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID #	Amount of
Heffernan	Lawrence			Р	Cash Money	=	onal Check lit/Debit Card	1597		Contribution
Residential Street Address		City			State	Zip Code	1	Date Received		
36 Aletha Rd		Needham	l		MA	02492-4302	(	09/25/2009	9	
Principal Occupation		Name of En				Is this contribution a fundraising event lis		1a <b>x</b>	Yes	
attorney		Robinsor	1 & Cole LLP			If yes, list Event #			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggr	egate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		\$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	L \	res X	No		1		1
Last Name Roffe	First Name Andrew			MI S	Method of Cash	contribution:	onal Check	Contribution	on ID #	Amount of
Rolle	Andrew	1		]		= =	lit/Debit Card	1598		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
1192 Park Ave Apt 1D		New York	<u> </u>		NY	10128-1314	(	09/25/2009	9	ļ
Principal Occupation		Name of En				Is this contribution a fundraising event lis		1^	Yes	
attorney		Kobinsor	1 & Cole LLP			If yes, list Event #			No	
Is contributor a principal of a state contractor of	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggr	egate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative	L 1	es x	No				

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING D											
Dan Malloy For Connecticut (C	T)						(	Origina	al 10/13/2009		
		B. Itemized Contributi	ions fron	ı Individu	ıals						
Last Name Daniels	First Name Eric		MI D	Cash	contribution:    X   Personal Cl y Order		Contribution 1	ID#	Amount of Contribution		
Residential Street Address 112 Quail Run		City Glastonbury		State CT	Zip Code 06033-2737		te Received /25/2009				
Principal Occupation Attorney		Name of Employer Robinson & Cole, LLP		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		1 1 .				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio \$37!	ons 5.00	\$375.00		
Last Name Zuckernik	First Name James		MI B	Cash	contribution:  X Personal Cl y Order Credit/Deb	ı	Contribution I	ID#	Amount of Contribution		
Residential Street Address 32 Draper Rd		City Dover		State MA	Zip Code 02030-1610		te Received /25/2009				
Principal Occupation Attorney		Name of Employer Robinson & Cole			Is this contribution associa fundraising event listed in If yes, list Event # 092		11.				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio \$37!	ons 5.00	\$375.00		
Last Name Raabe	First Name Craig		MI A	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1	ID#	Amount of Contribution		
Residential Street Address 446 Bell St		City Glastonbury		State CT	Zip Code 06033-1728		te Received /25/2009				
Principal Occupation attorney		Name of Employer Robinson & Cole LLP		•	Is this contribution associa fundraising event listed in If yes, list Event # 092						
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio \$100	ons 0.00	\$100.00		
Last Name Phillips	First Name Earl		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1	ID#	Amount of Contribution		
Residential Street Address PO Box 265		City Middle Haddam		State CT	Zip Code 06456-0265		te Received /25/2009				
Principal Occupation Attorney		Name of Employer Robinson & Cole, LLP		•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1	11.				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyist child of a lob	byist?	Aggrega	ate Contributio \$50	ons 0.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Scheib	Jacqueline	e		Р	Cash Money	y Order Personal C		1604		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
32 Arundel Ave		West Har	tford		СТ	06107-1705	0	9/25/2009	9	
Principal Occupation Attorney		Name of Er Robinsor				Is this contribution associ- fundraising event listed in If yes, list Event # 09:			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:	1	Contributio	on ID #	
Lukingbeal	Eric				x Cash	Personal C y Order Credit/Del		1605	лг нэ #	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
168 Day St		Granby			СТ	06035-1725	0	9/25/2009	Ð	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
lawyer		Robinsor	n & Cole			fundraising event listed in If yes, list Event #	Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Hadden	J.C. David	l -			Cash Money	y Order Personal C		1606		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
10 Talcott Mountain Rd		Simsbury	<u>'</u>		СТ	06070-2515	0	9/25/2009	9	
Principal Occupation		Name of Er				Is this contribution associ- fundraising event listed in			Yes	
Attorney		Robinsor	1 & Cole			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob		Aggre	gate Contribu	itions	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	No		Ψ.		Ψ100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Baker	Frank			L	Cash Money	y Order Personal C		1607		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
100 York St # 12-0		New Hav	en		СТ	06511-5620	0	9/25/2009	<del></del>	
Principal Occupation Attorney		Name of Er Robinsor	nployer n & Cole, LLP			Is this contribution associ fundraising event listed in If yes, list Event # 092	Section I		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	ations	\$200.00
government the contract is with:		Executive	Legislative	1	res X	No				

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING D											
Dan Malloy For Connecticut (C	T)						Ori	ginal 10/13/2009			
		B. Itemized Contributi	ions from	ı Individu	ıals						
Last Name	First Name		MI	Method of	contribution:	C	Contribution ID #	Amount of			
Moran	Brian		E	Cash Money	V Order X Personal Cl	1	.608	Contribution			
Residential Street Address		City		State	Zip Code	Date F	Received				
43 Marvin Ridge Rd		New Canaan		СТ	06840-6904	09/2	25/2009				
Principal Occupation Attorney		Name of Employer Robinson & Cole			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes				
Is contributor a principal of a state contractorstate contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	Contributions \$375.0	0 \$375.00			
Last Name Moynihan	First Name Carla		MI M	Cash	contribution:    X   Personal Cl	neck 1	Contribution ID #	Amount of Contribution			
Residential Street Address 3 Long Ave		City Belmont	•	State MA	Zip Code 02478-2957		Received 25/2009				
Principal Occupation attorney		Name of Employer Robinson & Cole LLP			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes	]			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate	Contributions \$100.0	0 \$100.00			
Last Name Smith	First Name Robert		MI H	Cash	contribution:  X Personal Cl  / Order Credit/Debi	neck 1	Contribution ID #	Amount of Contribution			
Residential Street Address 39 Scarborough St		City Hartford		State CT	Zip Code 06105-1106		Received 25/2009				
Principal Occupation Attorney		Name of Employer Robinson & Cole			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$50.0	0 \$50.00			
Last Name McDowell	First Name Linda		MI	Cash	contribution:    X   Personal Cl	neck 1	Contribution ID #	Amount of Contribution			
Residential Street Address 35 Old Farms Rd		City Andover		State CT	Zip Code 06232-1027		Received 25/2009				
Principal Occupation lawyer		Name of Employer Robinson & Cole LLP			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$50.0	0 \$50.00			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Tobin	Rhonda				Cash Money	y Order X Personal C		1612		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received		
4 Anja Dr		Simsbury	,		СТ	06070-1547	0	9/25/2009	)	
Principal Occupation		Name of Er	mployer		1	Is this contribution associ		1^	Yes	
attorney		Robinsor	n & Cole LLP			fundraising event listed in  If yes, list Event # 09	Section . 242009		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis		Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:	П	Executive	Legislative	1 —	t child of a lob Yes	•		\$3	375.00	\$375.00
Last Name	First Name			MI		contribution:		Contributio	on ID #	
Merriam	Dwight			Н	Cash	Personal C  y Order X Credit/Del		1613	лг 1D #	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
80 Latimer Ln		Weatogu	е		СТ	06089-9747	0	9/25/2009	)	
Principal Occupation		Name of En	mployer			Is this contribution associ		1^	Yes	
lawyer		Robinsor	n & Cole LLP			fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	on ID#	Amount of
Kramer	Andrew				Cash Money	Personal C  y Order  X  Credit/Del		1614		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
98 Club Rd		Riverside			СТ	06878-2032	0	9/25/2009	9	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		1^	Yes	
attorney		Kodinsor	n & Cole LLP			If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		outor a lobbyis	, 1	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		F			t child of a lob Tes	-		\$3	375.00	\$375.00
government the contract is with:	<u></u>	Executive	Legislative	<del>                                     </del>	1			1		
Last Name Fishberg	First Name Mitchell			MI L	Cash	contribution:		Contribution 1615	on ID #	Amount of Contribution
		1				y Order X Credit/Del				
Residential Street Address  20 Hidden Valley Dr		City Rocky Hil	I		State CT	Zip Code 06067-1729		ate Received 9/25/2009	)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ		1^	Yes	
attorney		Robinsor	n & Cole LLP			fundraising event listed in If yes, list Event # 09		1?	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 -	t child of a lob Yes	•		\$3	375.00	\$375.00
government the contract is with:		LACCULIVE	Legislative	1 - '	ت ۔۔۔	*10	1			l

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Narang	Rakesh				Cash Money	y Order X Personal C		1617		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
1869 Burr St		Fairfield			СТ	06824-1804	0	9/25/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ		^	Yes	
CEO/Owner		Wire and	l Plastic Machine	_		fundraising event listed in  If yes, list Event # 09	252009		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 <sup>-</sup>	child of a lob	*		\$1	00.00	\$100.00
government the contract is with:	First Name		Degisianive	I MI		contribution:	<u> </u>	Contributio	ID //	<u> </u>
Bhat	T.T.			IVII	Cash	x Personal C	Check	Contributio	n ID#	Amount of Contribution
					Money	y Order Credit/De	bit Card	1010		
Residential Street Address		City			State	Zip Code		ate Received		
1280 Long Ridge Rd		Stamford			СТ	06903-4432	0	9/25/2009	)	
Principal Occupation		Name of En	mployer			Is this contribution associ fundraising event listed in		^	Yes	
bank executive		HSBC				If yes, list Event # 09			No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut	tions .00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	
Shah	Hiren				Cash	y Order Responsible Credit/De		1619	ш 1D #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
884 S Springfield Ave		Springfie	ld		NJ	07081-3325	0	9/25/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ		1^	Yes	
finance consultant		Prime Ti	me Capital Funding L	LC		fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t snouse or	Agara	gate Contribut	tions	İ
state contractor?  Is yes, indicate which branch or branches of			i es i i i i i i i i i i i i i i i i i i		child of a lob	byist?	Aggie	-	.00.00	\$100.00
government the contract is with:		Executive	Legislative	L 1	res x	No				
Last Name	First Name			MI		contribution:		Contributio	n ID#	Amount of
Mathur	Madhu	1			Cash Money	y Order Personal C		1620		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
105 River W		Greenwic	:h		СТ	06831-4100		9/25/2009		
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
physician		Stamford	d Hospital			If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor?	or prospective	1	Yes X No		utor a lobbyis	-	Aggre	gate Contribut		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res X	-		\$1	00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals		,		
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Patel	Vrunda				Cash Money	y Order X Personal C		1621		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
27 Meredith Ln		Stamford	l		СТ	06903-4114	0	9/25/2009	9	
Principal Occupation graphic design		Name of Er self	nployer		•	Is this contribution associ- fundraising event listed in If yes, list Event # 09.			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name	First Name			MI		contribution:	<u> </u>	Contributio	ID #	
Arya	Harbans			WII	Cash	y Order Personal C		1623	on ID#	Amount of Contribution
Residential Street Address		City		1	State	Zip Code	D	ate Received		
328 Den Rd		Stamford	l		СТ	06903-3806	0	9/25/2009	)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ		1^	Yes	Ī
retired		retired				fundraising event listed in  If yes, list Event # 092			No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 550.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Ahuja	Sangeeta				Cash Money	y Order Personal C		1625		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
98 Lynam Rd		Stamford			СТ	06903-4523	0	9/25/2009	)	
Principal Occupation diabetes educator		Name of Er Stamford	nployer d Hospital			Is this contribution associ- fundraising event listed in If yes, list Event # 09:	Section J		Yes No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	tions	†
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 ~	child of a lob	•		-	50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Stellini	James				Cash Money	y Order X Credit/Del		1636		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
24300 Genesee Village Rd		Golden			со	80401-7034	0	9/25/2009	)	
Principal Occupation  Aircraft Maintenance Instructor		Name of Er United A				Is this contribution associ- fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis	byist?	Aggre	gate Contribu \$3	tions 375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative	L 1	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Stellini	Deborah			А	Cash Money	Personal C  y Order X Credit/De		1637		Contribution
Residential Street Address		City		•	State	Zip Code	Е	ate Received		
24300 Genesee Village Rd		Golden			СО	80401-7034	0	9/25/2009	9	
Principal Occupation Speech-Language Pathologist		Name of Er self-emp			•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	itions 375.00	\$375.00
government the contract is with:	<u></u>	Executive	Legislative	+ =				T		
Last Name Walkley	First Name Nancy			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 1633	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Е	Pate Received		
9 Hill Cir		Trumbull			СТ	06611-2064	0	9/25/2009	9	
Principal Occupation		Name of Er	nployer			Is this contribution associ			Yes	ĺ
ATTORNEY		First Am	erican Title			fundraising event listed in If yes, list Event #	Section .	J1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$1	ntions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Vaswani	Sunil				Cash Money	Personal C  y Order X Credit/De		1634		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
32 Grenhart Rd		Stamford	<u> </u>		СТ	06902-5525	0	9/26/2009	9	
Principal Occupation		Name of Er	nployer			Is this contribution associ fundraising event listed in		1^	Yes	
manager		Super-8				If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No		outor a lobbyis		Aggre	egate Contribu	itions	İ
state contractor? Is yes, indicate which branch or branches of			П		t child of a lob Yes	-		\$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	1			1		
Last Name Akhtar	First Name Saad			MI	Cash	contribution: Personal C  y Order X Credit/De		Contribution 1635	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Е	Date Received		
29 Van Buren Ave Apt K11		Norwalk			СТ	06850-3326	0	9/26/2009	9	
Principal Occupation		Name of Er	nployer			Is this contribution associ		1^	Yes	[
hospitality		Greenwi	ch Hospitality			fundraising event listed in  If yes, list Event # 09		J1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependen	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribu \$1	itions	\$100.00
government the contract is with:		Executive	Legislative	_ L L 1	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. It	emized Contributi	ions from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Stellini	Jessica			R	Cash Money	y Order X Credit/De		1642		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
24300 Genesee Village Rd		Golden			со	80401-7034	0	9/26/2009		
Principal Occupation  Not Employed		Name of Er	mployer			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	outor a lobbyist child of a lob	byist?	Aggre	egate Contribut	ions 75.00	\$375.00
government the contract is with:	l <sub>E' (M</sub>	Executive	Legislative	+ =	I			1		
Last Name Detora	First Name Alice			MI E	Cash	y Order Personal C		Contribution 1638	ı ID#	Amount of Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
84 Taylor Rd		Sterling			СТ	06377-1415	0	9/26/2009		
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1^1	Yes	
attorney		Robinson	n & Cole			If yes, list Event # 09		1 1	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut	ions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	ı ID#	Amount of
Altman	Ann	_		M	Cash Money	y Order X Credit/De		1639		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
71 Blake Rd		Hamden			СТ	06517-3404	0	9/26/2009		
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		<sub>11?</sub>	Yes	
writer		Sell				If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut	ions 10.00	\$10.00
government the contract is with:  Last Name	First Name			MI	I	contribution:		Contribution	2 ID #	
Appleton	Timothy				Cash	Personal C  y Order X Credit/De		1640	110#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
161 Woodland Dr		South Wi	indsor		СТ	06074-2337	0	9/26/2009		
Principal Occupation aide		Name of Er	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		D12 브	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	1	Yes X No	dependent	utor a lobbyis	byist?	Aggre	gate Contribut	ions 35.00	\$35.00
government the contract is with:		Executive	Legislative	Y	res X	No				1.5.7

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Stellini	Daniel			J	Cash Money	y Order X Personal C		1641		Contribution
Residential Street Address		City			State	Zip Code	D	Date Received		
1002 Kingswood Dr Unit E		Chapel H	ill		NC	27517-9489	0	9/26/2009	1	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ fundraising event listed in		J1? $f egin{array}{cccccccccccccccccccccccccccccccccccc$		
student		TI/ d				If yes, list Event #		X	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 —	child of a lob	•		\$3	75.00	\$375.00
government the contract is with:	I Firmt Name	Executive	Legislative	I MI				I		
Last Name Ahuja	First Name  Dharam F	'aul		MI	Cash	contribution:  X Personal C	Check	Contribution	n ID#	Amount of Contribution
					Money	y Order Credit/De	bit Card	1626		
Residential Street Address		City			State	Zip Code		Date Received		
98 Lynam Rd		Stamford	<u> </u>		СТ	06903-4523	0	9/26/2009	1	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^1	Yes	
business		ACS, Inc	<b>:.</b>			If yes, list Event # 09		1 1	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of		<b>.</b>			child of a lob	-		\$	50.00	\$50.00
government the contract is with:		Executive	Legislative	+-	1			1		
Last Name Yadav	First Name Chandran	nohan		MI M	Method of Cash	contribution:	Check	Contribution	n ID#	Amount of Contribution
radav	Charlaran	·			_	y Order Credit/De	bit Card	1627		Contribution
Residential Street Address		City			State	Zip Code	D	Date Received		
71 Strawberry Hill Ave Apt 1116		Stamford	<u> </u>		СТ	06902-2714	0	9/26/2009	l	•
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^1	Yes	
banking		JP Morga	an Chase			If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribut	tions	•
state contractor? Is yes, indicate which branch or branches of			_		child of a lob	-		-	50.00	\$50.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No		1		
Last Name	First Name			MI		contribution:	heck	Contribution	n ID#	Amount of
Abraham	Thomas				Cash Money	y Order Credit/De		1628		Contribution
Residential Street Address		City			State	Zip Code	D	Date Received		
100 Briar Brae Rd		Stamford	I		СТ	06903-1722	0	9/26/2009	ı	
Principal Occupation		Name of E	mployer			Is this contribution associ		1^1	Yes	
market analyst		Innovati Inc.	ve Research and Pro	ducts,		fundraising event listed in  If yes, list Event # 09		1 1	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of				1 -	child of a lob	•		-	50.00	\$50.00
government the contract is with:	Ш	Executive	Legislative	1	res X	No				

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Ali	Nazim				Cash	y Order X Personal C		1629		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
414 W Main St		City Stamford			CT	06902-4754		9/26/2009	)	
Principal Occupation		Name of Er	mplover			Is this contribution associa	ated with	a <b>x</b>	Yes	
fitness		self	F - 22			fundraising event listed in	Section 3 252009	J1?	No	
							<u> </u>	<u> </u>	1.0	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob	-	Aggre	egate Contribu		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 ~	res x	•		\$	50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	n ID#	Amount of
Gannu	Santosh				X Cash	Personal C		1630		Contribution
					-					
Residential Street Address 538 Newfield Ave		City Stamford			State	Zip Code 06905-3713		Pate Received 19/26/2009	)	
Principal Occupation		Name of Er			1	Is this contribution associa				
software consulting		1	ll Technologies			fundraising event listed in	Section .		Yes No	
						If yes, list Event # 092	252009	<u> </u>	NO	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob	-	Aggre	egate Contribu	tions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$	50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributio	n ID#	Amount of
Gannu	Snehal				x Cash	Personal C		1631		Contribution
		ı				y Order Credit/Del				
Residential Street Address 600 Hope St Unit 1		City Stamford			State CT	Zip Code 06907-2713		Pate Received 19/26/2009	)	
					Ci	Is this contribution associa				
Principal Occupation hrd. exe.		Name of Er America	nployer n Infotech Inc.			fundraising event listed in	Section .	<sup>J1?</sup>	Yes	
						If yes, list Event # 092	252009	<u>A</u> L	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob		Aggre	egate Contribu	tions	
Is yes, indicate which branch or branches of	П	Executive	Legislative	Î	res x	•		\$	50.00	\$50.00
government the contract is with:  Last Name	First Name			MI	1	contribution:	<u> </u>	Contributio	n ID #	
Gannu	Vinod			1411	x Cash	Personal C	Check	1632	n ID#	Amount of Contribution
					Money	y Order Credit/Deb	bit Card	1002		
Residential Street Address		City			State	Zip Code		ate Received		
600 Hope St Unit 1		Stamford			СТ	06907-2713		9/26/2009		<u> </u>
Principal Occupation director engineering		Name of En	nployer n Infotech Inc.			Is this contribution association fundraising event listed in		J1?	Yes	
anector engineering		/	1			If yes, list Event # 092	252009	<u>A</u> L	No	
Is contributor a principal of a state contractor	or prospective	-	Yes X No		outor a lobbyis	-	Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 -	t child of a lob Yes	•		\$	50.00	\$50.00
government the contract is with:		Executive	Legisiative	<u> </u>	103	INO	<u> </u>			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Martin	First Name Sarah		MI L	Cash	contribution: Personal Cl	neck 164	ribution ID #	Amount of Contribution
Residential Street Address 2121 Long Ridge Rd		City Stamford		State CT	Zip Code 06903-2105	Date Rec		
Principal Occupation Student		Name of Employer University of Pennsylvania			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	\$375.00	\$375.00
Last Name Martin	First Name Judith		MI	Cash	contribution: Personal Cl  / Order X Credit/Debi	neck 164	ribution ID #	Amount of Contribution
Residential Street Address 2121 Long Ridge Rd		City Stamford		State CT	Zip Code 06903-2105	Date Rec 09/27/		
Principal Occupation Teacher		Name of Employer Stamford Public Schools			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	stributions \$375.00	\$375.00
Last Name Shaw	First Name Miriam		MI B	Cash	contribution: Personal Cl  Order X Credit/Debi	neck 165	ribution ID #	Amount of Contribution
Residential Street Address 185 Van Rensselaer Ave		City Stamford		State CT	Zip Code 06902-8211	Date Rec		
Principal Occupation  RPT-Business		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	stributions \$200.00	\$100.00
Last Name Stroker	First Name Eric		MI C	Cash	contribution: Personal Cl  / Order X Credit/Debi	neck 164	ribution ID #	Amount of Contribution
Residential Street Address PO Box 11		City Morris		State CT	Zip Code 06763-0011	Date Rec		
Principal Occupation n/a		Name of Employer n/a			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	ntributions \$15.00	\$15.00

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Hardink	Brian			J	Cash Mone	y Order X Personal C		1657		Contribution
Residential Street Address		City			State	Zip Code	Е	Date Received	Į	
8238 W Manchester Ave # 203		Playa Del	Rey		CA	90293-8197	C	9/27/200	9	
Principal Occupation		Name of En	nployer			Is this contribution associ fundraising event listed in			Yes	
Engineer		Engineer	•	-		If yes, list Event #	r section .	, [ <u>.</u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lot es	-		:	\$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Chimes	Elizabeth			М	Cash Mone	y Order X Credit/De		1658		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received	I	
196A Apache Ln		Stratford			СТ	06614-8184	C	)9/27/200	9	
Principal Occupation		Name of En	nployer			Is this contribution associ fundraising event listed in			Yes	
Retired		n/a				If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of				1 m	child of a lot	•		:	\$10.00	\$10.00
government the contract is with:		Executive	Legislative	1	res X	No	<u> </u>			
Last Name	First Name Lorna			MI	Method of Cash	contribution:	Theck	Contributi	on ID#	Amount of
Aliperti	LOTTIA	1				y Order X Credit/De		1659		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
236 Stamford Ave		Stamford			СТ	06902-8233	C	)9/28/200	9	ļ
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in		J1?	Yes	
Nurse practitioner		self emp	ioyea			If yes, list Event #		<u>&gt;</u>	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of				1 —	child of a lob	-		\$	100.00	\$100.00
government the contract is with:		Executive	Legislative	<del>                                     </del>	res x			1		
Last Name Pereira	First Name Jennie			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
rerend	Jenne					y Order X Credit/De		1660		Contribution
Residential Street Address		City			State	Zip Code	Е	Date Received	1	
1 Bryan Cir		Seymour			СТ	06483-3676	C	9/28/200	9	
Principal Occupation		Name of En	nployer			Is this contribution associ			Yes	
Housewife		N/A				fundraising event listed in If yes, list Event #	i pernou	) i i	No No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	it, spouse, or	Aggr	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of	_			dependent	child of a lob	byist?	1-551	-	375.00	\$375.00
government the contract is with:		Executive	Legislative	L	es x	No	1			l

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Goldstein	First Name Melvin		MI S	Cash	contribution:    X   Personal Character   Credit/Debi	neck 1646	ution ID#	Amount of Contribution
Residential Street Address 87 Sanford Ln		City Stamford		State CT	Zip Code 06905-2819	Date Receive 09/28/20		
Principal Occupation Retired		Name of Employer None		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	stributions \$100.00	\$100.00
Last Name Usher	First Name Victoria		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 1647	ution ID#	Amount of Contribution
Residential Street Address 81 Hale Rd		City Glastonbury		State CT	Zip Code 06033-3317	Date Receive 09/28/20		
Principal Occupation  Medical Technologist		Name of Employer		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$25.00	\$25.00
Last Name Berg	First Name Erica		MI L	X Cash	contribution:  Personal Ch y Order  Credit/Debi	neck 1648	ution ID#	Amount of Contribution
Residential Street Address 115 Grand Ave Apt A1		City New Haven		State CT	Zip Code 06513-3900	Date Receiv		
Principal Occupation exec. asst.		Name of Employer Town of East Haven			Is this contribution associate fundraising event listed in St. If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Cont	ributions \$20.00	\$20.00
Last Name Pearce	First Name Lynn		MI E	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 1650	ution ID#	Amount of Contribution
Residential Street Address 101 Russet Rd		City Stamford		State CT	Zip Code 06903-1825	Date Receiv		
Principal Occupation Teacher		Name of Employer Info Requested		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contribu	tions fron	ı Individu	ıals			
Last Name Fitzgibbons	First Name Carl		MI	x Cash	contribution:  Personal C	heck 1651	ution ID#	Amount of Contribution
Residential Street Address 17 Jordan Ln		City Portland		State CT	Zip Code 06480-1620	Date Receive 09/28/20		
Principal Occupation Retired		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes  No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Contr	\$10.00	\$10.00
Last Name Fahey	First Name Marcella		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 1652	ution ID#	Amount of Contribution
Residential Street Address 501 High St		City Coventry		State CT	Zip Code 06238-3342	Date Receive 09/28/20		
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00
Last Name Gilman	First Name Frederick		MI	x Cash	contribution:  Personal Contribution:  Personal Contribution:	heck 1653	ution ID#	Amount of Contribution
Residential Street Address 14 Michael Dr		City East Hampton		State CT	Zip Code 06424-1884	Date Receive 09/28/20		
Principal Occupation attorney		Name of Employer self-employed			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes  No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	\$20.00	\$20.00
Last Name Benton-Rzeznik	First Name Zinka		MI C	Cash	contribution:  Personal Contribution:  y Order X Credit/Deb	heck 1656	ution ID#	Amount of Contribution
Residential Street Address 115 Orcutt Dr		City Guilford		State CT	Zip Code 06437-2295	Date Receive 09/28/20		
Principal Occupation attorney		Name of Employer Carmody & Torrance, LLP		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	substitutions \$150.00	\$150.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	NG DUE DATE
Dan Malloy For Connecticut (C	T)						Origi	nal 10/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals			
Last Name Buden	First Name Nicholas		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 16	ntribution ID #	Amount of Contribution
Residential Street Address 38 Pinnacle Rd		City Plainville		State CT	Zip Code 06062-1430	Date Re	eceived 3/2009	
Principal Occupation electrician		Name of Employer Delmar Electric			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$525.00	\$375.00
Last Name Lawlor	First Name Michael		MI	X Cash	contribution: Personal Cl	neck 16	ntribution ID#	Amount of Contribution
Residential Street Address 560 Silver Sands Rd Unit 412		City East Haven		State CT	Zip Code 06512-4658	Date Re 09/28	eceived 3/2009	
Principal Occupation Professor		Name of Employer University of New Haven		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$120.00	\$20.00
Last Name Margolis	First Name Estelle		MI T	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 17	ntribution ID #	Amount of Contribution
Residential Street Address 72 Myrtle Ave		City Westport		State CT	Zip Code 06880-3512	Date Re	eceived 9/2009	
Principal Occupation Architect/Artist		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$100.00	\$50.00
Last Name Greenberg	First Name Arnold		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 16	ntribution ID#	Amount of Contribution
Residential Street Address 65 Westwood Rd		City West Hartford		State CT	Zip Code 06117-2253	Date Re 09/29	eceived 9/2009	
Principal Occupation Private Investor		Name of Employer Self-Employed		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (	Contributions \$375.00	\$375.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Birdwhistell	Nan			M	Cash Money	Personal C  x Credit/Del		1719		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
16 Cleft Rock Ln		Woodbrid	lge		СТ	06525-1417	0	9/29/2009	1	
Principal Occupation Attorney		Name of Er Murtha,	nployer Cullina LLP		•	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID #	
Rickard	Louise				Cash	Personal C  y Order		1682	II 1D #	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
108 Little Brook Dr		Newingto	on		СТ	06111-5322	0	9/29/2009	1	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	
Retired		None				fundraising event listed in If yes, list Event #	i Section 3	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Graham	Luke				Cash Money	y Order X Credit/Del		1723		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
1138 SW Ithaca St		Port St Li	ucie		FL	34983-2540	0	9/29/2009		
Principal Occupation		Name of Er	nployer			Is this contribution associ fundraising event listed in		л: <u>Ш</u>		
Investor		Self				If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No		outor a lobbyis t child of a lob	byist?	Aggre	gate Contribut	tions	\$50.00
government the contract is with:		Executive	Legislative		res X	No				
Last Name Smit	First Name Pieter			MI H	Method of Cash	contribution: Personal C	Check	Contribution	n ID#	Amount of Contribution
					Money	y Order X Credit/Del	bit Card	1081		
Residential Street Address  109 Silver Hill Ln		City Stamford	ı		State CT	Zip Code 06905-3236		ate Received	ı	
					Ci	Is this contribution associ			1	
Principal Occupation  Analyst		Name of Er	npioyer			fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribut	tions 75.00	\$25.00
government the contract is with:		Executive	Legislative	1	res X	No				

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons from	Individu	uals				
Last Name OSullivan	First Name Patrick			MI B	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 701 Orange Center Rd		City Orange			State CT	Zip Code 06477-1830		ate Received		
Principal Occupation Town Clerk		Name of E				Is this contribution assoc fundraising event listed in If yes, list Event # 09		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es X	obyist?	Aggre	egate Contribu	utions \$50.00	\$50.00
Last Name Sachs	First Name Peter			MI	Cash	contribution: Personal of the property of the		Contributi 1670	on ID#	Amount of Contribution
Residential Street Address 443 Webbs Hill Rd		City Stamford	i		State CT	Zip Code 06903-3935		ate Received		
Principal Occupation Retired		Name of E	mployer		•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	-	Aggre	gate Contrib	utions 350.00	\$250.00
Last Name Percy	First Name Stephen			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 1662	on ID#	Amount of Contribution
Residential Street Address 14 New Shore Rd		City Waterfor	rd		State CT	Zip Code 06385-3609		ate Received		
Principal Occupation  Commercial Real Estate		Name of E	mployer Commercial			Is this contribution assoc fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x		Aggre	gate Contrib	utions 150.00	\$50.00
Last Name Bernardo	First Name John			MI F	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 3 Sunflower Cir		City West Ha	ven		State CT	Zip Code 06516-6229		ate Received		
Principal Occupation fire inspector		Name of E	<sup>mployer</sup> ven Fire Dept.		•	Is this contribution assoc fundraising event listed in If yes, list Event # 09	n Section J	11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	-	Aggre	gate Contrib	utions 225.00	\$125.00

		I. M	IONETARY RE	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Morrissey	James			W	Cash Money	y Order		1709		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
305 Country Hill Dr		West Hav	/en		СТ	06516-5518	0	9/29/2009	1	
Principal Occupation state marshal		Name of Er self	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut \$2.	tions 25.00	\$100.00
Last Name	First Name			MI		contribution:		Contribution	ID #	
Marcus	Edward			L	Cash	y Order Credit/De		1694	n ID#	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
100 Stony Creek Rd		Branford			СТ	06405-3236	0	9/29/2009	1	
Principal Occupation		Name of Er	mployer			Is this contribution associ		1^1	Yes	
Attorney		self emp	loyed			fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut \$3	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Marcus	Jill			S	Cash Money	y Order Personal C		1707		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
100 Stony Creek Rd		Branford			СТ	06405-3236	0	9/29/2009		
Principal Occupation		Name of Er	nployer			Is this contribution associ fundraising event listed in		<sub>11?</sub>	Yes	
retired		n/a				If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis		Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		t child of a lob Yes	-		\$3	75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
MacDonald	Bruce			Т	Cash Money	Personal (  y Order X Credit/De		1724		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
26 Stanton St		Pawcatuo	ck		СТ	06379-1842	0	9/29/2009		
Principal Occupation public relations consultant		Name of Er self	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	ı	Yes X No	dependen	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut	tions 75.00	\$50.00
government the contract is with:		Executive	Legislative	_ L 1	Yes X	No	1			

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Ostuw	Cathleen			L	Cash Money	y Order X Personal C		1673		Contribution
Residential Street Address	-	City		-	State	Zip Code	Б	ate Received		
32 Blackberry Dr		Stamford	I		СТ	06903-1205	0	9/29/2009	1	
Principal Occupation retired		Name of Er	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	n ID#	Amount of
Nussbaum	Gloria			В	Cash Money	Personal C  y Order X Credit/De		1684		Contribution
Residential Street Address	-	City		-	State	Zip Code	Б	ate Received		
29 Dogwood Ln		Westport	:		СТ	06880-5022	0	9/29/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in			Yes	
Home		N/A				If yes, list Event #	i section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$3	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	n ID#	Amount of
Miela	Pamela				Cash Money	y Order X Credit/De		1661		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
106 Williams Crossing Rd		Lebanon			СТ	06249-1339	0	9/29/2009	)	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		J1?		
realtor		Covenan	it Realty			If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contribut	tions	İ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$3	75.00	\$375.00
government the contract is with:  Last Name	First Name	Executive	Degisianve	MI	I	contribution:	<u> </u>		ID //	<u> </u>
Gately	Patricia			W	Cash	y Order Personal Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	Б	ate Received		
1422 Main St		East Hart	ford		СТ	06108-1613	0	9/29/2009	)	
Principal Occupation		Name of Er			-	Is this contribution associ			Yes	
owner - broker real estate		Mariner	Realty, LLC			fundraising event listed in If yes, list Event #	i occuon .	x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	ĺ
state contractor? Is yes, indicate which branch or branches of		Evanution	Legislative		child of a lob	-		\$	50.00	\$50.00
government the contract is with:	Ш	Executive	Legisiative	<u> </u>	. C	INU				<u> </u>

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Grudberg	Ira			В	Cash Money	y Order		1664		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
350 Orange St		New Have	en		СТ	06511-6403	0	9/29/2009	9	
Principal Occupation Attorney		Name of En	<sup>nployer</sup> Grudberg, Belt, Dow	and Katz		Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$1	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:	-	Contributio	on ID #	Amount of
Kaufman	Mark			S	Cash Money	Personal C  V Order  X Credit/De		1666	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
25 Crescent St		Stamford	<u> </u>		СТ	06906-1839	0	9/29/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
retired businessman		N/A				fundraising event listed in If yes, list Event #	n Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu \$2	ations 200.00	\$200.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Camhi	Keith			Е	Cash Money	Personal (  x Credit/De		1667		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
51 Knobloch Ln		Stamford	<u> </u>		СТ	06902-1701	0	9/29/2009	9	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
entrepreneur		great pla	iy			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob		Aggre	egate Contribu		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Fountain	James				Cash Money	Personal C  V Order  X Credit/De		1668		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
35 Oakdale Rd		Stamford			СТ	06906-1414	0	9/29/2009	9	
Principal Occupation		Name of En	mployer			Is this contribution associ			Yes	
СРА		Retired				fundraising event listed in If yes, list Event #	i secuon .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		t child of a lob Yes	-		\$2	200.00	\$200.00
government the contract is with:							1			i

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Hekking	Shaun				Cash Money	Personal C  y Order  X  Credit/De		1669		Contribution
Residential Street Address	-	City			State	Zip Code	D	ate Received		
176 W 87th St Apt 3D		New York	(		NY	10024-2902	0	9/29/2009	)	
Principal Occupation ad sales		Name of Er	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1? $\square$	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributio	n ID#	Amount of
Redniss	Jaime			D	Cash Money	Personal C  y Order  X  Credit/De		1671		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
78 Old North Stamford Rd		Stamford	<u> </u>		СТ	06905-3961	0	9/29/2009		
Principal Occupation		Name of En	mployer			Is this contribution associ			Yes	
retired		N/A				fundraising event listed in If yes, list Event #	1 Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$3	75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Polan	Joshua	_			Cash Money	y Order X Credit/De		1672		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
87 Fox Glen Dr		Stamford			СТ	06903-2200	0	9/29/2009	)	ļ
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		J1?		
executive		w.r. berk	dey corporation			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	•	Yes X No		outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut	tions 75.00	\$375.00
government the contract is with:		Executive	Legislative		res X	No				
Last Name	First Name			MI		contribution:		Contributio	n ID#	Amount of
Polan	Sharon	1		R	Cash Money	y Order X Credit/De		1679		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
87 Fox Glen Dr		Stamford			СТ	06903-2200		9/29/2009	-	
Principal Occupation interior designer		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1? $f egin{array}{cccccccccccccccccccccccccccccccccccc$	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No		outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut	tions 75.00	\$375.00
government the contract is with:		Executive	Legislative	1	res X	No				

		I. MO	ONETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Item	nized Contributio	ons from	Individu	ıals				
Last Name Martin	First Name Rachel			MI E	Cash	contribution: Personal ( y Order		Contribution 1674	on ID#	Amount of Contribution
Residential Street Address 311 E 25th St Apt 4B		City New York			State NY	Zip Code 10010-2501		Date Received 09/29/2009		
Principal Occupation Engineer		Name of Emplo WSP Canto	-		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribu \$3	ations 375.00	\$375.00
Last Name Smith	First Name Jan			MI L	Cash	contribution: Personal ( y Order		Contribution 1675	on ID#	Amount of Contribution
Residential Street Address 3 Prospect Ave		City Darien			State CT	Zip Code 06820-3512		Oate Received		
Principal Occupation not employed		Name of Emplo	loyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name Edwards	First Name Duncan			MI	Cash	contribution: Personal C		Contribution 1676	on ID#	Amount of Contribution
Residential Street Address 41 Fairfield Rd		City Greenwich			State CT	Zip Code 06830-4833		Pate Received		
Principal Occupation not for profit		Name of Emplo	•		•	Is this contribution associ fundraising event listed in If yes, list Event #		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	ations 375.00	\$375.00
Last Name Mead	First Name Marie			MI T	Cash	contribution: Personal Q y Order X Credit/De		Contribution 1677	on ID#	Amount of Contribution
Residential Street Address 37 Orchard St		City Cos Cob			State CT	Zip Code 06807-2402		Date Received		
Principal Occupation Homemaker		Name of Emplo	loyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	ations 375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contribut	tions fron	ı Individu	ıals					
Last Name Kendall	First Name Thomas		MI A	Cash	contribution: Personal C y Order X Credit/Deb	heck 1678	bution ID#	Amount of Contribution		
Residential Street Address 301 Tresser Blvd Fl 9		City Stamford		State CT	Zip Code 06901-3250	Date Recei				
Principal Occupation  Money Management		Name of Employer Five Mile Capital			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Ward	First Name Matthew		MI	Cash	contribution: Personal Contribution:  y Order X Credit/Deb	heck 1680	bution ID#	Amount of Contribution		
Residential Street Address 1130 Connecticut Ave NW Ste 300	)	City Washington		State DC	Zip Code 20036-3981	Date Recei				
Principal Occupation  Lawyer		Name of Employer The Ferguson Group			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Diamond	First Name Michael		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1855	bution ID #	Amount of Contribution		
Residential Street Address 360 New Haven Ave		City Milford		State CT	Zip Code 06460-6648	Date Recei				
Principal Occupation President/Owner		Name of Employer Premier Maintenance, Inc		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		
Last Name Bello	First Name George		MI E	Cash	contribution:  X Personal City Order Credit/Deb	heck 1842	bution ID#	Amount of Contribution		
Residential Street Address 164 Mountain Wood Rd		City Stamford		State CT	Zip Code 06903-2113	Date Recei				
Principal Occupation n/a		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$375.00	\$375.00		

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Hogen	First Name Charles		MI R	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 1683	tion ID#	Amount of Contribution
Residential Street Address 61 Neptune Ave		City Norwalk		State CT	Zip Code 06854-4823	Date Receive 09/29/20		
Principal Occupation Public Affairs Officer		Name of Employer Yale University			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes  No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	butions \$75.00	\$75.00
Last Name Condon	First Name Lawrence		MI M	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 1685	tion ID#	Amount of Contribution
Residential Street Address 4 Stonewall Ln		City Monroe		State CT	Zip Code 06468-3228	Date Receive 09/29/20		
Principal Occupation  IT Manager		Name of Employer Sikorsky Aircraft		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	butions \$5.00	\$5.00
Last Name Condon	First Name Judith		MI C	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 1686	ition ID#	Amount of Contribution
Residential Street Address 4 Stonewall Ln		City Monroe		State CT	Zip Code 06468-3228	Date Receive 09/29/20		
Principal Occupation Accountant		Name of Employer N/A		-	Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	Yes  No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	butions \$5.00	\$5.00
Last Name Halloran	First Name Robert		MI B	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 1687	ition ID#	Amount of Contribution
Residential Street Address 791 Prospect Ave		City Hartford		State CT	Zip Code 06105-4233	Date Receive 09/29/20		
Principal Occupation lawyer		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	butions \$375.00	\$375.00

		I. MON	ETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Itemize	ed Contributi	ons from	Individu	ıals				
Last Name Delibro	First Name Robert			MI D	Cash	contribution: Personal ( y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 64 Hickory Knoll Dr		City Easton			State CT	Zip Code 06612-1449		ate Received		
Principal Occupation  Realtor/Business Owner		Name of Employer DeLibro Realty				Is this contribution assoc fundraising event listed in If yes, list Event # 09		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggre	gate Contrib	ations 200.00	\$200.00
Last Name Morris	First Name Robert			MI S	Cash	contribution:  Personal of the property of the		Contributi 1689	on ID#	Amount of Contribution
Residential Street Address 35 Cathlow Dr		City Riverside			State CT	Zip Code 06878-2602		ate Received		
Principal Occupation private equity		Name of Employer Olympus advi				Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contrib	utions 375.00	\$375.00
Last Name Winik	First Name Mark			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 115 Highland Ave		City Branford			State CT	Zip Code 06405-4760		ate Received		
Principal Occupation Independent Contractor		Name of Employer self	r			Is this contribution assoc fundraising event listed in If yes, list Event # 09		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	bbyist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Sachs	First Name Howard			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address PO Box 3275		City Branford			State CT	Zip Code 06405-1875		ate Received		
Principal Occupation contractor		Name of Employer Cherryhill Con			•	Is this contribution assoc fundraising event listed in If yes, list Event # 09	n Section J	11? E	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions 250.00	\$250.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Ite	emized Contributi	ons fron	ı Individu	ıals		'		
Last Name Pignone	First Name Helen			MI	Cash	contribution:		Contribution	n ID#	Amount of Contribution
Residential Street Address 185 Warpas Rd		City Madison			State CT	Zip Code 06443-2022	1	Date Received 09/29/2009		
Principal Occupation retired		Name of En	nployer			Is this contribution association fundraising event listed in If yes, list Event # 092	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$37	ions 75.00	\$375.00
Last Name Balletto	First Name Dominic			MI F	Cash	contribution:  X Personal C  / Order Credit/Del		Contribution 1693	n ID#	Amount of Contribution
Residential Street Address 724 Middletown Ave		City New Have	en		State CT	Zip Code 06513-1033	1	Date Received		
Principal Occupation tax accountant		Name of En	nployer		•	Is this contribution association fundraising event listed in If yes, list Event # 092		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$37	ions 75.00	\$375.00
Last Name Lee	First Name Timothy			MI J	Cash	contribution:  X Personal C  Order Credit/Deb		Contribution	ı ID#	Amount of Contribution
Residential Street Address 23 Tuxis Rd		City Madison			State CT	Zip Code 06443-3002	1	Date Received		
Principal Occupation attorney		Name of En	nployer Ippolito & Lee			Is this contribution association fundraising event listed in If yes, list Event # 092	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$37	ions 75.00	\$375.00
Last Name Hecht	First Name Eli			MI	Cash	contribution:  X Personal C  Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 656 Prospect St		City New Have	en		State CT	Zip Code 06511-2004	- 1	Date Received 09/29/2009		
Principal Occupation property manager		Name of En Pile Inter	nployer rnational Apartments	5	•	Is this contribution association fundraising event listed in If yes, list Event # 092		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$37	ions 75.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name	First Name		MI		contribution:		tion ID#	Amount of		
Karp	Oliver		В	Cash Money	Order Credit/Deb	1697		Contribution		
Residential Street Address		City		State	Zip Code	Date Receive				
57 S Water St  Principal Occupation		New Haven		СТ	06519-2821  Is this contribution associa	09/29/20	_	1		
Director		Name of Employer Eliezer, Inc.			fundraising event listed in	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	butions \$375.00	\$375.00		
Last Name Murillo	First Name Eric		MI	Cash	contribution:    X   Personal Cl	heck 1698	tion ID#	Amount of Contribution		
Residential Street Address 27 Hickory St		City West Haven		State CT	Zip Code 06516-5615	Date Receive 09/29/20				
Principal Occupation Dental Tech		Name of Employer Accudent Lab Inc.			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$150.00	\$150.00		
Last Name McLoughlin	First Name Bernard		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 1699	tion ID#	Amount of Contribution		
Residential Street Address 1248 Ridge Rd	•	City North Haven	•	State CT	Zip Code 06473-3052	Date Receive 09/29/20				
Principal Occupation fundraiser		Name of Employer community health Chamber England	of New	•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$250.00	\$250.00		
Last Name Demattie	First Name Albert		MI	x Cash	contribution: Personal Cl	heck 1700	ition ID#	Amount of Contribution		
Residential Street Address 79 Anderson Ave		City West Haven		State CT	Zip Code 06516-6104	Date Receive 09/29/20				
Principal Occupation laborer		Name of Employer West Haven Public Works			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons from	Individu	uals				
Last Name Maturo	First Name Catherine			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 294 Hawthorne Ln		City Orange			State CT	Zip Code 06477-2932		Date Received		
Principal Occupation substitute teacher		Name of E	<sup>mployer</sup> ven Board of Educati	on		Is this contribution assoc fundraising event listed i If yes, list Event # 09		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es X	obyist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Daniels	First Name John			MI C	Cash	contribution:  X Personal y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 339 Eastern St Apt B1314		City New Hav	en		State CT	Zip Code 06513-2444		Date Received		
Principal Occupation Retired		Name of E	mployer		•	Is this contribution assoc fundraising event listed i If yes, list Event # 09		<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	-	Aggre	egate Contrib	utions 250.00	\$250.00
Last Name Shanley	First Name Robert			мі С	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 219 Currier Dr		City Orange			State CT	Zip Code 06477-2921		Date Received		
Principal Occupation none listed		Name of E	mployer n Associates		•	Is this contribution assoc fundraising event listed i If yes, list Event # 09	n Section .	J1? [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res		Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Klett	First Name Maureen			MI H	Cash	contribution:  X Personal y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 104 Harold Dr		City Newingto	on		State CT	Zip Code 06111-4220		Date Received 09/29/200		
Principal Occupation Supervising Nurse Consultant		Name of E	Connecticut			Is this contribution assoc fundraising event listed i If yes, list Event # 09	n Section .	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	-	Aggre	egate Contrib	utions 350.00	\$350.00

		I. N	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Klett	Richard				Cash Money	y Order X Personal C		1706		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
104 Harold Dr		Newingto	on		СТ	06111-4220	0	9/29/2009	)	
Principal Occupation		Name of E	nployer		•	Is this contribution associ		1^	Yes	ĺ
Director of Security		Town of	Newington			fundraising event listed in  If yes, list Event # 09	Section J 292009	J1?	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	tions	ĺ
state contractor?  Is yes, indicate which branch or branches of				1 —	child of a lob	*		\$3	50.00	\$350.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No		1		
Last Name Klett	First Name			MI F	Method of Cash	contribution:	Theck	Contributio	n ID#	Amount of
Kiett	Joseph			٢		y Order Credit/De		1708		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
44 Stoddard Ave		Newingto	on		СТ	06111-1910	0	9/29/2009	)	
Principal Occupation		Name of E	nployer			Is this contribution associ		1^	Yes	
CT State Marshall		self				fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	tions 50.00	\$350.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	
Morris	Bruce			L	Cash	y Order Registration Registrati		1711	ш 1D #	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
135 Pawson Rd		Branford			СТ	06405-5035	0	9/29/2009	)	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		. [^	Yes	
Retired		Retired				fundraising event listed in If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t chouse or	Τ.			
state contractor?	or prospective		Yes X No		child of a lob		Aggre	egate Contribu	00.00	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	No		Ψ±		\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Quake	Maureen			С	Cash Money	y Order Personal C		1712		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
192 Shorefront St		Milford			СТ	06460-5962	0	9/29/2009	)	
Principal Occupation		Name of E	mployer			Is this contribution associ		1^	Yes	
retired		retired				fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	tions	İ
state contractor? Is yes, indicate which branch or branches of			_	1 ~	child of a lob	•		-	75.00	\$375.00
government the contract is with:	ᆜ	Executive	Legislative	1	res x	No	1			

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Nolan	William				Cash Mone	y Order X Personal C		1713		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
5 Guernsey Ln		Wallingfo	ord		СТ	06493-0001	0	9/29/2009	)	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ		1^	Yes	
State Marshall		self				fundraising event listed in If yes, list Event # 09	292009		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	Î	t child of a lob Yes	•		\$1	00.00	\$100.00
government the contract is with:  Last Name	First Name	Encount		I MI		contribution:	1	Contributio	ID #	
Cappucci	Joseph			IVII	Cash	X Personal C	Check	1714	in ID#	Amount of Contribution
					Mone	y Order Credit/Del	bit Card	1/11		
Residential Street Address		City			State	Zip Code		ate Received		
1 Surrey Dr		North Ha			СТ	06473-1530		9/29/2009		
Principal Occupation  Retired		Name of Er None	nployer			Is this contribution associ fundraising event listed in			Yes	
Retired		None				If yes, list Event # 09.	292009	<u>A</u> L	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		t child of a lob Yes	-		\$1	00.00	\$100.00
government the contract is with:  Last Name	First Name	LACCULIVE	Legisiative	I MI		contribution:			TD //	<u> </u>
Illingworth	William			J	Cash	X Personal C	Check	Contributio	on ID#	Amount of Contribution
		,			Mone	y Order Credit/Del	bit Card	1713		
Residential Street Address		City			State	Zip Code		ate Received		
175 S End Rd Unit 21		East Hav	en		СТ	06512-4556		9/29/2009		ļ
Principal Occupation		Name of Er	nployer Connecticut			Is this contribution associ fundraising event listed in		in?	Yes	
State Marshal		State of	Connecticut			If yes, list Event # 09	292009	<u>a</u> L	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis		Aggre	gate Contribu	tions	ĺ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	Î	t child of a lob Yes	•		\$3	75.00	\$375.00
government the contract is with:	l <sub>E' (M</sub>	Executive	Legislative	+ -	1			1		<u> </u>
Last Name Spader	First Name Walter			MI M	Cash	contribution:  X Personal C	Check	Contributio	n ID#	Amount of Contribution
·					Mone	y Order Credit/Del	bit Card	1716		
Residential Street Address		City			State	Zip Code		ate Received		
15 Leighton Ct		North Ha	ven		СТ	06473-1037	0	9/29/2009	)	ļ
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		11?	Yes	
attorney		i Marcus I	_aw Firm			If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	gate Contribu	tions	ĺ
state contractor? Is yes, indicate which branch or branches of					t child of a lob Yes	-			00.00	\$100.00
government the contract is with:	Ш	Executive	Legislative		res X	No				1

		I. MONETARY RI	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009
		B. Itemized Contribu	tions fron	n Individu	ıals		•	
Last Name Paniccia	First Name Domenic		MI	Cash	contribution:    X   Personal Cl	heck 1717	oution ID#	Amount of Contribution
Residential Street Address 606 Post Rd E # 690		City Westport		State CT	Zip Code 06880-4540	Date Recei		
Principal Occupation broker (real estate)		Name of Employer Panest Corp.			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Cont	ributions \$375.00	\$375.00
Last Name Schmidt	First Name Evan		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1718	oution ID#	Amount of Contribution
Residential Street Address 1804 Whitney Ave		City Hamden		State CT	Zip Code 06517-1404	Date Recei		
Principal Occupation manager		Name of Employer Rozoil			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00
Last Name Cloutier	First Name George		MI A	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 1721	oution ID#	Amount of Contribution
Residential Street Address 240 N Ocean Blvd		City Palm Beach		State FL	Zip Code 33480-3756	Date Recei		
Principal Occupation Owner /CEO		Name of Employer American Management Ser	vices, Inc.		Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Cont	ributions \$375.00	\$375.00
Last Name Cloutier	First Name Tiffany		MI D	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 1732	oution ID#	Amount of Contribution
Residential Street Address 240 N Ocean Blvd		City Palm Beach		State FL	Zip Code 33480-3756	Date Recei		
Principal Occupation  VP PHILANTHROPIC DEV.		Name of Employer  AMERICAN MANAGEMENT S INC	SERVICES,	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$375.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Itemiz	zed Contribution	ons from	Individu	uals				
Last Name Murtha	First Name Holly			MI S	Cash	contribution: Personal y Order X Credit/Do		Contributi	on ID#	Amount of Contribution
Residential Street Address 12 Jeremy Dr		City New Fairfield			State CT	Zip Code 06812-2110		Date Received		
Principal Occupation N/A		Name of Employe	er		-	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	obyist?	Aggre	egate Contrib	utions \$25.00	\$25.00
Last Name Sullivan	First Name John			MI J	Cash	contribution: Personal y Order X Credit/Do		Contributi	on ID#	Amount of Contribution
Residential Street Address 62 Dutton St		City Wallingford			State CT	Zip Code 06492-3202		Date Received		
Principal Occupation  Manager Quality		Name of Employe	er		•	Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob es	-	Aggre	egate Contrib	utions \$50.00	\$50.00
Last Name Adil	First Name Andrew			MI S	Cash	contribution: Personal y Order X Credit/Do		Contributi 1726	on ID#	Amount of Contribution
Residential Street Address 944 Ridge Rd		City Wethersfield			State CT	Zip Code 06109-2855		Date Received		
Principal Occupation  Investment Advisor		Name of Employe				Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res		Aggre	egate Contrib	utions \$25.00	\$25.00
Last Name Jones	First Name Elizabeth			MI	Cash	contribution: Personal y Order X Credit/Do		Contributi	on ID#	Amount of Contribution
Residential Street Address 101 Harrison Ave		City New Canaan			State CT	Zip Code 06840-5804		Date Received		
Principal Occupation gardener		Name of Employe	er			Is this contribution assoc fundraising event listed i If yes, list Event#		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	-	Aggre	egate Contrib	utions \$15.00	\$15.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009
		B. Itemized Contributi	ions fron	ı Individu	ıals			
Last Name Redniss	First Name Robin		MI W	Cash	contribution:  Personal Cl y Order X Credit/Deb	neck 172	ibution ID#	Amount of Contribution
Residential Street Address 54 Brookhollow Ln	1	City Stamford	1	State CT	Zip Code 06902-1015	Date Rece 09/29/2		-
Principal Occupation teacher		Name of Employer long ridge school		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cor	\$375.00	\$375.00
Last Name Brenneman	First Name Russell		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	neck 173	ibution ID #	Amount of Contribution
Residential Street Address 320 Bayberry Ln		City Westport		State CT	Zip Code 06880-1315	Date Rece 09/29/2		
Principal Occupation retired		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	stributions \$50.00	\$50.00
Last Name Vratna	First Name Hana		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 173	ibution ID #	Amount of Contribution
Residential Street Address 950 Cove Rd Apt 1A		City Stamford		State CT	Zip Code 06902-5445	Date Rece 09/29/2		
Principal Occupation Administrator		Name of Employer Five Mile Capital Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Cor	s375.00	\$375.00
Last Name Adkins-Green	First Name Sheryl		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	neck 173	ibution ID #	Amount of Contribution
Residential Street Address 4424 Potomac Ave		City Dallas		State TX	Zip Code 75205-2631	Date Recei		
Principal Occupation Business		Name of Employer Mary Kay Inc		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cor	stributions \$100.00	\$100.00

		I. MONETARY I	RECEII	PTS (Secti	on A-I)				
NAME OF COMMITTEE							I	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(	Origina	al 10/13/2009
		B. Itemized Contrib	utions fi	rom Individ	luals				
Last Name	First Name		MI	Method o	of contribution:		Contribution	ID#	Amount of
Martin	Herbert		W	Casl Mor	Personal of the Personal of th		1734		Contribution
Residential Street Address		City		State	Zip Code		ate Received		
606 W Red Bridge Rd		Kansas City		МО	64114-5143	09	9/29/2009		
Principal Occupation		Name of Employer			Is this contribution assoc fundraising event listed i			Yes	
Retired		N/A			If yes, list Event #		X 1	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		ontributor a lobby		Aggreg	gate Contributio	ons	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	depe	Yes X	No		\$37!	5.00	\$375.00
Last Name	First Name		MI	Method o	of contribution:		Contribution	ID#	Amount of
Martin	Gene		R	Casl Mor	Personal x Credit/De		1735		Contribution
Residential Street Address		City		State	Zip Code	Da	ate Received		
2309 Red Bridge Ter		Kansas City		МО	64131-3633	09	9/29/2009		
Principal Occupation		Name of Employer			Is this contribution assoc fundraising event listed i			Yes	
Retired		N/A			If yes, list Event #	500	. x	No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is co	ontributor a lobby	ist, spouse, or	Aggreg	gate Contributio	ons	
state contractor? Is yes, indicate which branch or branches of			depe	ndent child of a le	obbyist? No		\$37!	5.00	\$375.00
government the contract is with:		Executive Legislative	_			<u> </u>	1		
Last Name Mcmahon	First Name Pamela		MI D	Method o	of contribution:	Check	Contribution 1	ID#	Amount of Contribution
Tiernamon	Tamela				ey Order X Credit/De	bit Card	1736		Contribution
Residential Street Address		City		State	Zip Code		ate Received		
21 Woods Row		Monroe		СТ	06468-1016	09	9/29/2009		
Principal Occupation		Name of Employer Rehabilitation Associates			Is this contribution assoc fundraising event listed i		<sub>1?</sub> 🗀	Yes	
Physical Therapist		Reliabilitation Associates			If yes, list Event #		<b>x</b> 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		ontributor a lobby	-	Aggreg	gate Contributio	ons	
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative	depe	Yes X	obbyist? No		\$37!	5.00	\$375.00
government the contract is with:  Last Name	First Name	Executive Eegistative	MI		of contribution:	<u> </u>			
Flaherty	Susan		E	Casl		Check	Contribution 1	ID#	Amount of Contribution
		1		Mor	ey Order X Credit/De	bit Card	1737		
Residential Street Address		City		State	Zip Code		ate Received		
231 Hoyt St		Darien		СТ	06820-2702		9/29/2009		
Principal Occupation		Name of Employer N/A			Is this contribution assoc fundraising event listed i		1? 별	Yes	
Homemaker		.,,,			If yes, list Event #		X 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		ontributor a lobby		Aggreg	gate Contributio	ons	
Is yes, indicate which branch or branches of		Executive Legislative	deper	Yes X	No		\$37!	5.00	\$375.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	ı Individu	ıals		,		
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Kruger	Peter			S	Cash Money	y Order X Credit/De		1738		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
200 Schermerhorn St Apt 513		Brooklyn			NY	11201-5895	0	9/29/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
Business Systems Specialist		Wireless	Generation, Inc.	_		fundraising event listed in If yes, list Event #	1 Section .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 —	child of a lob	•		\$3	375.00	\$375.00
government the contract is with:	I Firmt Name	LACCULIVE	Legislative	<u>Т</u> мі			<u> </u>	1		
Last Name Caraco	First Name Lucio			MI	Cash	contribution:  X Personal (	Check	Contributio	on ID #	Amount of Contribution
					Money	y Order Credit/De	bit Card	1739		
Residential Street Address		City			State	Zip Code	D	ate Received		
58 Stone Rd		Burlingto	n		СТ	06013-2611	0	9/30/2009	9	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		1^	Yes	
electrical contractor		Paving S	ystems			If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective		Yes X No		utor a lobbyis child of a lob	bbyist?	Aggre	gate Contribu \$3	tions 375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative	_ L L	res X	No				
Last Name	First Name			MI		contribution:		Contributio	on ID#	Amount of
Gaynor	Mark	1			Cash Money	y Order Personal C		1740		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
16 Three Elms Rd		Branford			СТ	06405-5728	0	9/30/2009	9	ļ
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
clinical social worker		self				If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		\$3	350.00	\$350.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No		1		
Last Name	First Name			MI	Method of Cash	contribution:	Theck	Contributio	on ID#	Amount of
Laydon	Kristy					y Order Credit/De		1741		Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
28 Grove Hill Rd		Woodbrid	lge		СТ	06525-1446	0	9/30/2009	9	
Principal Occupation		Name of Er	mployer		_	Is this contribution associ		1^	Yes	
Vice President		Laydon I	industries, LLC			fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	tions	[
state contractor? Is yes, indicate which branch or branches of		Evacuti	Legislative		child of a lob	•		\$3	375.00	\$375.00
government the contract is with:		Executive	Legisiative	<u> </u>		110	1			1

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FII	LING DUE DATE
Dan Malloy For Connecticut (C	T)						Or	riginal 10/13/2009
		B. Itemized Contributi	ons from	ı Individu	ıals			
Last Name Laydon	First Name L. Christir	ne	MI	Cash	contribution:  X Personal Cl  / Order	neck 1	Contribution ID	# Amount of Contribution
Residential Street Address 16 Forest Glen Dr		City Woodbridge		State CT	Zip Code 06525-1449		Received 30/2009	
Principal Occupation treasurer		Name of Employer Laydon Industries			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contributions \$375.0	
Last Name Laydon	First Name Elmer		MI F	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 1	Contribution ID	# Amount of Contribution
Residential Street Address 16 Forest Glen Dr		City Woodbridge		State CT	Zip Code 06525-1449		Received 30/2009	
Principal Occupation President		Name of Employer Elmer F. Laydon Construction	1		Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions \$375.0	
Last Name Hersh	First Name Arthur		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck 1	Contribution ID	# Amount of Contribution
Residential Street Address  1 Oak Bluff Dr		City Fairfield		State CT	Zip Code 06825-1236		Received 30/2009	
Principal Occupation builder/developer		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contributions \$375.0	
Last Name Ryan	First Name Jill		MI	Cash	contribution:  X Personal Cl  / Order Credit/Debi	neck 1	Contribution ID	# Amount of Contribution
Residential Street Address 28 Castle Rock		City Branford		State CT	Zip Code 06405-4459		Received 30/2009	
Principal Occupation  Home Maker		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions \$375.0	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Arotsky	First Name Jeffrey		MI B	Cash	contribution:    X   Personal Cl y Order	heck 1746	ution ID#	Amount of Contribution		
Residential Street Address 817 W Main St		City West Haven		State CT	Zip Code 06516-4867	Date Receiv 09/30/20				
Principal Occupation appraisal		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	sibutions \$375.00	\$375.00		
Last Name Bergamo	First Name Mark		MI L	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1747	ution ID#	Amount of Contribution		
Residential Street Address 149 Laurel St		City West Haven		State CT	Zip Code 06516-5646	Date Receiv 09/30/20				
Principal Occupation lawyer		Name of Employer The Marcus Law Firm		•	Is this contribution associa fundraising event listed in If yes, list Event # 092		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$375.00	\$375.00		
Last Name Glantz	First Name Irwin		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1748	ution ID#	Amount of Contribution		
Residential Street Address The Crossing at Blind Brook Purch	ase Street	City Purchase		State NY	Zip Code 10577	Date Receiv 09/30/20				
Principal Occupation none listed		Name of Employer Self-Employed		•	Is this contribution associa fundraising event listed in If yes, list Event # 092	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Contr	ibutions \$375.00	\$375.00		
Last Name Mitchell	First Name Steven		MI S	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 1751	ution ID#	Amount of Contribution		
Residential Street Address 432 Hopmeadow St		City Weatogue		State CT	Zip Code 06089-9731	Date Receiv 09/30/20				
Principal Occupation Auto Dealer		Name of Employer Mitchell Auto Group	_	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (CT	Γ)								Origina	al 10/13/2009
		B. Ito	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Murkette	James				Cash Money	Personal C  X Credit/Del		1753		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
50 Whiting Ln		West Har	tford		СТ	06119-1641	0	9/30/2009	1	
Principal Occupation energy consultant		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:	r prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribut \$10	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contribution	n ID#	Amount of
Bildner	Mark				Cash Money	Personal C  V Order  X Credit/Del		1755		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
64 Deep Valley Rd		Stamford			СТ	06903-2726	0	9/30/2009	١	
Principal Occupation		Name of En				Is this contribution associ- fundraising event listed in			Yes	
Vice President		Bildner C	Capital Corp.			If yes, list Event #	- Section .	x	No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:	r prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$3	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Boas	Andrew			М	Cash Money	Personal C  y Order X Credit/Del		1757		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
74 Morningside Dr S		Westport			СТ	06880-5415	0	9/30/2009	1	
Principal Occupation		Name of En				Is this contribution association fundraising event listed in			Yes	
Inv. Manager		Carl Mar	ks & Co, Inc.			If yes, list Event #	- Section :	х	No	
Is contributor a principal of a state contractor or state contractor?	r prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	egate Contribut	tions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res X	-		\$3	75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Mohib	Mona			G	Cash Money	Personal C  y Order X Credit/Del		1758		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
616 E St Apt 712		Washingt	on		DC	20004-2273	0	9/30/2009		
Principal Occupation		Name of En	<sup>nployer</sup> Woods Consulting, L	ıc		Is this contribution associ- fundraising event listed in		<sub>J1?</sub> 브	Yes	
Consultant		L				If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor or	r prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$3	75.00	\$375.00
government the contract is with:										

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Martin	Janet			J	Cash Money	Personal C  y Order X Credit/De		1760		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
622 Huntington Rd		Kansas C	City		МО	64113-1342	0	9/30/2009	)	
Principal Occupation Retired		Name of Er	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$3	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID #	Amount of
Martin	Lee			W	Cash Money	Personal C  y Order  X Credit/De		1761		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
622 Huntington Rd		Kansas C	City		МО	64113-1342	0	9/30/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in			Yes	
Retired		N/A				If yes, list Event #	i Section .	х	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$3	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Nesin	Merritt			А	Cash Money	y Order Redit/De		1762		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
118 Gary Rd		Stamford	l		СТ	06903-4829	0	9/30/2009	)	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
Engineer		Self Emp	Dioyea			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	•	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
government the contract is with:	<u>.                                    </u>	Executive	Legislative		res X	No		•		
Last Name Fuhrman	First Name Edward			MI J	Cash	contribution:  X Personal C y Order Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		
186 Overbrook Dr		Stamford	I		CT	06906-1017		9/30/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ	ated with	a	Yes	
Retired		n/a				fundraising event listed in If yes, list Event #	n Section .	J1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut \$1	tions 50.00	\$150.00
government the contract is with:		Executive	Legislative	_ L L 1	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Ite	emized Contributi	ons fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Gold	Leo				Cash	X Personal (		1764		Contribution
		1			Money	y Order Credit/De				
Residential Street Address		City			State	Zip Code		ate Received		
143 Hoyt St Apt 5F		Stamford			СТ	06905-5745		9/30/2009		
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in				
Attorney		Benjamii	i & Goid			If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	•		•	00.00	\$100.00
government the contract is with:		Executive	Legislative	<u> </u>	es x	No				
Last Name	First Name			MI		contribution:		Contribution	n ID#	Amount of
Mackiewicz	Jeffrey				Cash Money	y Order X Personal C		1765		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
10 E Scard Rd		Wallingfo	rd		CT	06492-2708		9/30/2009		
Principal Occupation		Name of En			1	Is this contribution associ				
Salesman		Harty Pre				fundraising event listed in		11? <b>브</b>	Yes No	
						If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of		E .:	Legislative	I —	child of a lob	-		\$1	00.00	\$100.00
government the contract is with:		Executive	Legislative	+ -				1		<u> </u>
Last Name Byrne	First Name Kyle			MI D	Method of Cash	contribution:	Theck	Contribution	n ID#	Amount of Contribution
byffie	Kyle					y Order Credit/De		1766		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
50 Wacona Ave Apt 2D		Waterbur	у		СТ	06705-1243	0	9/30/2009	1	
Principal Occupation		Name of En	nployer		•	Is this contribution associ	ated with	a <b>x</b>	Yes	
electrician		Delmar E	Electric			fundraising event listed in  If yes, list Event # 09		11?	No	
				1			1			
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	, I	Aggre	gate Contribut		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	•		\$3	75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contribution	n ID #	
LoMonte	John				Cash	X Personal (	Check	1769	II ID #	Amount of Contribution
		,			Money	y Order Credit/De	bit Card	1703		
Residential Street Address		City			State	Zip Code	D	ate Received		
39 W Wynd Ter		Middletov	vn		СТ	06457-8729	0	9/30/2009		
Principal Occupation		Name of En				Is this contribution associ		1^1	Yes	
Real Estate Appraiser/Broker		Self-Emp	oloyed			fundraising event listed in If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	In contrib	utor a lobbyis	·	1			ł
state contractor?	or prospective		Yes X No		child of a lob	-	Aggre	gate Contribut	75.00	\$375.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res X	No		φ3	, 5.00	\$575.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Lomonte	Teresa				Cash Money	y Order X Personal C		1770		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
39 W Wynd Ter		Middletov	vn		СТ	06457-8729	0	9/30/2009	)	
Principal Occupation office clerk		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis	byist?	Aggre	egate Contribu \$3	itions 375.00	\$375.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No		1		
Last Name Zampelli	First Name Debra			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 1771	on ID#	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
19 Munson Ave		Waterbur	У		СТ	06705-2333	0	9/30/2009	9	
Principal Occupation		Name of En	nployer		-	Is this contribution associ		1^	Yes	
coder		Connecti	cut Ear, Nose and T	hroat		fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	bbyist?	Aggre	egate Contribu \$3	itions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Warner	Guy			G	Cash Money	y Order X Credit/De		1773		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
2248 49th St NW		Washingt	on		DC	20007-1057	0	9/30/2009	9	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Economist		Pareto E	nergy LTD			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis	byist?	Aggre	egate Contribu \$3	tions 375.00	\$375.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No		1		
Last Name Brown	First Name Kenneth			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 1775	on ID #	Amount of Contribution
Residential Street Address		City				Zip Code		ate Received		
4713 Trent Ct		City Chevy Ch	nase		State MD	20815-5516		9/30/2009	)	
Principal Occupation		Name of En	nployer			Is this contribution associ	ated with	a	Yes	ĺ
Consultant			uson Group			fundraising event listed in If yes, list Event #	n Section I	J1?	] No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis child of a lob	bbyist?	Aggre	egate Contribu \$3	tions 375.00	\$375.00
government the contract is with:	Ш	Executive	Legislative	L 1	res X	No	1			

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. It	emized Contribut	ions fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Droney	Nuala				Cash Money	Personal C  X Credit/Del		1777		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
51 Lemay St		West Har	tford		СТ	06107-3026	0	9/30/2009		
Principal Occupation Attorney		Name of En				Is this contribution associ fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribut \$	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Holloway	Gary				Cash Money	Personal C  V Order  X Credit/Del		1778		Contribution
Residential Street Address	-	City			State	Zip Code	Е	ate Received		
707 West Rd		New Can	aan		СТ	06840-2518	0	9/30/2009	١	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Investment Mgmt.		Five Mile	· Capital, LLC.			If yes, list Event #	- Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob 'es	byist?	Aggre	egate Contribut \$3	tions 75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Comerford	James				Cash Money	Personal C  y Order   Credit/Del		1779		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
28 South St		Collinsvill	le		СТ	06019-3165	0	9/30/2009	1	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		J1? <b>브</b>	Yes	
Associate Director		Oppenne	einer			If yes, list Event #		х	No	
Is contributor a principal of a state contractor state contractor?	or prospective	•	Yes X No		utor a lobbyis child of a lob	-	Aggre	egate Contribut	tions	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	es x	No		Ψ	00.00	Ψ100.00
Last Name	First Name			MI		contribution:		Contribution	n ID#	Amount of
Dorsey	Heather			А	Cash Money	Personal C  y Order X Credit/Del		1780		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
200 Bloomfield Ave Ofc		West Har	tford		СТ	06117	0	9/30/2009	1	
Principal Occupation  Clerk		Name of Er State of				Is this contribution associ fundraising event listed in If yes, list Event #		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	1	Yes X No		utor a lobbyis	byist?	Aggre	egate Contribut	tions 25.00	\$25.00
government the contract is with:		Executive	Legislative	Y	es X	No				<del>+</del>

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ions from	Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Mallory	Charles				Cash Money	Personal C  V Order  X Credit/Del		1781		Contribution
Residential Street Address		City		1	State	Zip Code	Е	ate Received		
2187 Atlantic St		Stamford			СТ	06902-6880	0	9/30/2009	)	
Principal Occupation shipbroker		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut \$2	tions 50.00	\$250.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributio	n ID#	Amount of
Tittle	Shawn				Cash Money	Personal C  y Order  X  Credit/Del		1782		Contribution
Residential Street Address		City		ı	State	Zip Code	Е	ate Received		
147 Hoop Pole Hill Rd		Woodbur	у		СТ	06798-1926	0	9/30/2009	)	
Principal Occupation		Name of En	nployer		•	Is this contribution associ			Yes	
surgeon		Danbury	Hospital			fundraising event listed in If yes, list Event #	section.	x	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Lachs	Stuart			М	Cash Money	Personal C  X Credit/Del		1783		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
100 Old Farm Rd S		Pleasantv	rille		NY	10570-1523	0	9/30/2009	)	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Architect		Perkins E	Eastman			If yes, list Event #	. Decition .	х	No	
Is contributor a principal of a state contractor of state contractor?	or prospective	ı	Yes X No		utor a lobbyis		Aggre	egate Contribut	tions	\$350.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res X	No		, şə	30.00	\$350.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Seth	William			A	Cash Money	Personal C  y Order		1784		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
6705 Royal Thomas Way		Alexandri	a		VA	22315-5900	0	9/30/2009	)	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in		J1?	Yes	
Federal Affairs		I ne Ferg	uson Group			If yes, list Event #		X	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribut	tions	Ì
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	child of a lob	-		\$3	75.00	\$375.00
government the contract is with:		LACCULIVE	Legislative		~ <u>~</u>	110	1			<u>l</u>

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemized Con	tribution	ns from	Individu	ıals				
Last Name Friedman	First Name Carl		ı	MI	Method of o	contribution:  X Personal of Credit/De		Contribution 1786	on ID#	Amount of Contribution
Residential Street Address 89 Riverbank Dr		City Stamford			State CT	Zip Code 06903-3536		ate Received 9/30/2009	)	
Principal Occupation investment advisor		Name of Employer Personal Business Ma Group Ltd.		t		Is this contribution assoc fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	_ ·		ator a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name Friedman	First Name Martha		N	MI	Cash	contribution:    X   Personal of Credit/December   Credit/December		Contribution 1787	on ID#	Amount of Contribution
Residential Street Address 89 Riverbank Dr		City Stamford			State CT	Zip Code 06903-3536		ate Received 9/30/2009	9	
Principal Occupation housewife		Name of Employer n/a				Is this contribution assoc fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	-		ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name Friedman	First Name James		ľ	MI	Cash	contribution:    X   Personal (		Contribution 1788	on ID#	Amount of Contribution
Residential Street Address 77 Fox Glen Dr		City Stamford			State CT	Zip Code 06903-2200		ate Received	)	
Principal Occupation money manager		Name of Employer PBMG				Is this contribution assoc fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	Ċ		utor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$3	ations 375.00	\$375.00
Last Name Cali	First Name Alfred		I J	MI J	Cash	contribution:    X   Personal of Credit/December 2		Contribution 1789	on ID#	Amount of Contribution
Residential Street Address 181 S Orchard St		City Wallingford			State CT	Zip Code 06492-4521		ate Received 9/30/2009	e	
Principal Occupation attorney		Name of Employer Cali & Pol				Is this contribution assoc fundraising event listed in If yes, list Event #		u? <b>_</b>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes	-		ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribu \$1	.00.00	\$100.00

	I. MONETARY RE	CEIPTS (Section	n A-I)			
NAME OF COMMITTEE					FILING	G DUE DATE
Dan Malloy For Connecticut (CT)					Origin	al 10/13/2009
	B. Itemized Contribution	ons from Individu	ıals			
Last Name First Nam	ie	MI Method of	contribution:	Contributi	on ID#	Amount of
Maze Valerie		E Cash	V Order X Personal Cl	1790		Contribution
D 11 110 111	a:	<u> </u>		- I -		
Residential Street Address  1465 E Putnam Ave Apt 127	City Old Greenwich	State CT	Zip Code 06870-1330	Date Received 09/30/200		
Principal Occupation			Is this contribution associa			
Attorney	Name of Employer  Town of Greenwich		fundraising event listed in	Section J1?	Yes	
			If yes, list Event #		No	
Is contributor a principal of a state contractor or prospec	ve Yes X No	Is contributor a lobbyis		Aggregate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of	Executive Legislative	dependent child of a lob	•	!	\$75.00	\$75.00
government the contract is with:  Last Name First Nar		<u> </u>	contribution:	l	"	
Pol Jose	e	A Cash	Personal Cl	heck Contributi	on ID#	Amount of Contribution
		Money	Order Credit/Deb	it Card 1791		
Residential Street Address	City	State	Zip Code	Date Received		
1114 Noble Ave	Bridgeport	СТ	06608-1024	09/30/200	9	
Principal Occupation	Name of Employer		Is this contribution associa fundraising event listed in		Yes	
attorney	self		If yes, list Event #	x x	No	
Is contributor a principal of a state contractor or prospec	ive Yes X No	Is contributor a lobbyis	t, spouse, or	Aggregate Contrib	itions	
state contractor? Is yes, indicate which branch or branches of		dependent child of a lob	•		100.00	\$100.00
government the contract is with:	Executive Legislative	Yes X	No			
Last Name First Nam	ne	1 1 -	contribution:	Contributi	on ID#	Amount of
D'Amato Tina		Cash Money	Order Credit/Deb	1792		Contribution
Residential Street Address	City	State	Zip Code	Date Received		
135 Elm St	Bridgeport	СТ	06604-4118	09/30/200	9	
Principal Occupation	Name of Employer	•	Is this contribution associa		Yes	
lawyer	self, LLC		fundraising event listed in If yes, list Event #	Section J1?	No	
Is contributor a principal of a state contractor or prospec	ive Yes X No	Is contributor a lobbyis	t snouse or	A	-4:	
state contractor?  Is yes, indicate which branch or branches of	res Mino	dependent child of a lob	byist?	Aggregate Contrib	\$50.00	\$50.00
government the contract is with:	Executive Legislative	Yes X	No			·
Last Name First Nam	ne	MI Method of	contribution:	Contributi	on ID#	Amount of
D'Amato Nichola	S	Cash Money	V Order X Personal Cl	<b> </b> 1793		Contribution
Residential Street Address	City	State	Zip Code	Date Received		
PO Box 8181	New Haven	СТ	06530-0181	09/30/200	9	
Principal Occupation	Name of Employer		Is this contribution associa		Yes	
lawyer	The Law Office of Tina Syper		fundraising event listed in If yes, list Event #	Section J1?	No	
	D'Amato, LLC					<del> </del>
Is contributor a principal of a state contractor or prospec state contractor?	Yes X No	Is contributor a lobbyis dependent child of a lob	-	Aggregate Contrib		\$50.00
Is yes, indicate which branch or branches of government the contract is with:	Executive Legislative	Yes x	No	<u> </u>	\$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ons fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Skiber	Michael				Cash Money	y Order X Personal Credit/De		1794		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
955 Main St		Bridgepoi	rt		СТ	06604-4300	0	9/30/2009	)	
Principal Occupation attorney		Name of En	nployer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribut	tions 00.00	\$100.00
Last Name	First Name			MI		contribution:	<u> </u>	Contributio	ID //	
Brown	Sefton			IVII	Cash	y Order		1795	in ID#	Amount of Contribution
Residential Street Address	•	City		-	State	Zip Code	D	ate Received		
33 Coleman St Apt A4		Bridgepoi	rt		СТ	06604-3421	0	9/30/2009	)	
Principal Occupation		Name of En	nployer		•	Is this contribution assoc			Yes	
attorney		self emp	loyed			fundraising event listed is If yes, list Event #	n Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob Yes	bbyist?	Aggre	egate Contribut	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Quartermain	Linda				Cash Money	y Order Personal Credit/De		1796		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
11 Glen Holw		West Har	tford		СТ	06117-3023	0	9/30/2009	)	ļ
Principal Occupation		Name of En				Is this contribution assoc fundraising event listed in		J1?	Yes	
lawyer		Рере а г	lazard LLP, Chubb Ir	ic.		If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	, 1	Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	•		\$1	00.00	\$100.00
government the contract is with:  Last Name	First Name			MI	I	contribution:			ID //	
Jones	Curtis			IVII	Cash	y Order		Contributio	in ID#	Amount of Contribution
Residential Street Address	•	City		-	State	Zip Code	D	ate Received		
17 River Bend Dr		Woodbur	у		СТ	06798-2730	0	9/30/2009	)	
Principal Occupation	· · ·	Name of En	nployer		-	Is this contribution assoc		^	Yes	
civil engineer		Civil 1				fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	-	Yes X No		utor a lobbyis		Aggre	egate Contribut	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	•		\$1	00.00	\$100.00
government the contract is with:		LACCULIVE	Logislative		<u>ت</u>	*10	1			l

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ions fron	Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Diaz	Victor			М	Cash Money	y Order X Personal C		1801		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
44 Linwood St		Waterbur	ту		СТ	06704-2217	0	9/30/2009	)	
Principal Occupation City of Waterbury		Name of Er Assistan	nployer t City Clerk			Is this contribution associ- fundraising event listed in If yes, list Event # 09:			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Ortiz	Rafael				X Cash Money	Personal C  Order Credit/Del		1802		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
170 Hillside Ave Apt 7B		Waterbur	<b>-</b> Y		СТ	06710-2118	0	9/30/2009	)	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ		1^	Yes	
business owner		self		_		fundraising event listed in  If yes, list Event # 093			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	tions 00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Brown	Raymond				Cash Money	y Order Personal C		1803		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
832 Christian Rd		Middlebu	ry		СТ	06762-3309	0	9/30/2009	)	
Principal Occupation		Name of Er				Is this contribution associ- fundraising event listed in		1^	Yes	
none listed		self emp	loyed			If yes, list Event # 093			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No		utor a lobbyis	, I	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of				1 m	child of a lob	*		\$1	00.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	res X			1		<u> </u>
Last Name Mecca	First Name Leonard			MI	Method of Cash	contribution:	heck	Contributio	n ID#	Amount of Contribution
Mecca	Leonard				_	y Order Credit/Del		1804		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
32 Hemingway Ave		Wolcott			СТ	06716-2925	0	9/30/2009	)	
Principal Occupation		Name of Er	nployer			Is this contribution associ- fundraising event listed in		1^	Yes	
President		AI_Tek I	instrument			If yes, list Event # 09.			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$1	00.00	\$100.00
government the contract is with:		LACCULIVE	Legislative	1 - '		***	1			l

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemized	Contribution	ons from	Individu	ıals				
Last Name Quicquaro	First Name Elaine			MI	Cash	contribution:  X Personal y Order Credit/D		Contribution 1805	on ID#	Amount of Contribution
Residential Street Address 165 Plainfield Dr		City Oakville			State CT	Zip Code 06779-2340		ate Received		
Principal Occupation teacher		Name of Employer Cheshire BOE				Is this contribution assoc fundraising event listed If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Leg	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name O'Connor	First Name Evelyn			MI M	Cash	contribution:  X Personal y Order Credit/D	Check ebit Card	Contribution 1806	on ID#	Amount of Contribution
Residential Street Address 222 Bayberry Dr		City Thomaston			State CT	Zip Code 06787-1082		ate Received 9/30/2009	9	
Principal Occupation retired		Name of Employer retired			•	Is this contribution associated fundraising event listed If yes, list Event # 05			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Leg	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name Longo	First Name Elio			MI	Cash	contribution:  X Personal y Order Credit/D		Contribution 1807	on ID#	Amount of Contribution
Residential Street Address 83 Bella Vista Dr		City Watertown			State CT	Zip Code 06795-1363		ate Received		
Principal Occupation  Danbury Public Schools		Name of Employer Director of Finan	ce			Is this contribution association fundraising event listed If yes, list Event # 09	in Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Leg	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu \$1	utions	\$100.00
Last Name Curran	First Name Kenneth			MI	Cash	contribution:  X Personal y Order Credit/D	Check ebit Card	Contribution 1808	on ID #	Amount of Contribution
Residential Street Address 16 Hard Hill Rd N		City Bethlehem			State CT	Zip Code 06751-1517		ate Received 9/30/2009		
Principal Occupation US House Of Rep.		Name of Employer Dir. Of Out Reach	n		•	Is this contribution association fundraising event listed If yes, list Event # 09	in Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Leg	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	tions 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ito	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI		contribution:		Contributio	on ID#	Amount of
Albini	Angelo				X Cash Money	Personal C  y Order Credit/Deb		1809		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
86 Three Mile Hill Rd		Waterbur	У		СТ	06708	0	9/30/2009	9	
Principal Occupation  construction		Name of En	nployer		•	Is this contribution association fundraising event listed in If yes, list Event # 093			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Corcoran	First Name Jeff			MI	x Cash	contribution:  Personal C y Order  Credit/Deb		Contribution 1810	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		
340 Middlebury Rd		City Middlebu	ry		CT	06762-2601		9/30/2009	9	
Principal Occupation		Name of En	nployer		-	Is this contribution associa	ated with	a x	Yes	
real estate sales		Weickert	: Realtors HP			fundraising event listed in  If yes, list Event # 093		1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$1	.00.00	\$100.00
Last Name	First Name			MI		contribution:		Contributio	on ID#	Amount of
Napiello	John				X Cash Money	y Order Personal C		1811		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
24 Williams Dr		Prospect			СТ	06712-1342	0	9/30/2009	<del></del>	
Principal Occupation police officer		Name of En City of W	nployer /aterbury			Is this contribution association fundraising event listed in If yes, list Event # 093	Section J		Yes No	
		<u> </u>				-	<u> </u>		_	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu \$	550.00	\$50.00
government the contract is with:  Last Name	First Name		Беділіште	I MI	I	contribution:		Contributio	ID #	
Lawlor	James			IVII	Cash	y Order Personal C		1812	on ID#	Amount of Contribution
Residential Street Address	-	City			State	Zip Code	D	ate Received		
200 Southwest Rd		Waterbur	У		СТ	06708-3214	0	9/30/2009	)	
Principal Occupation Retired		Name of En Retired	nployer			Is this contribution association fundraising event listed in  If yes, list Event # 093	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
government the contract is with:		Executive	Legislative	Т г,	res X	N0	<u> </u>			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Ponzillo	Michael				Cash Money	y Order X Personal Credit/Do		1813		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
67 Parklawn Dr		Waterbur	У		СТ	06708-2319	0	9/30/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution assoc		1^	Yes	
police officer		City of W	Vaterbury	_		fundraising event listed i  If yes, list Event # 09	n Section . 9302009		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	egate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	T and desires	1 <sup>-</sup>	t child of a lob Yes	•		5	\$50.00	\$50.00
government the contract is with:	<u></u>	Executive	Legislative	+-				1		
Last Name Sullivan	First Name Craig			MI A	Method of Cash	contribution:	Check	Contribution	on ID #	Amount of Contribution
Samran	J. a. g					y Order Credit/De	ebit Card	1814		Contribution
Residential Street Address		City			State	Zip Code	Е	Date Received		
40 Randolph Ave		Waterbur	У		СТ	06710-1620	0	9/30/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution assoc		1^	Yes	
Attorney		City of V	/aterbury	_		fundraising event listed i  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	itions	\$100.00
government the contract is with:		Executive	Legislative	<del>                                     </del>				1		
Last Name Lewis	First Name Erma			MI	Method of Cash	contribution:	Check	Contribution	on ID#	Amount of Contribution
Lewis	Liilla					y Order Credit/Do		1815		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
6 Lowell Ave		Waterbur	У		СТ	06708-1914	0	9/30/2009	9	ļ
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed it			Yes	
n/a		Retired				If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	outor a lobbyis	t spouse or	Agara	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	_				t child of a lob	byist?	Aggie	-	100.00	\$100.00
government the contract is with:		Executive	Legislative		res X	No		·		
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Ward	Lynn				Cash Money	y Order Personal Credit/De		1816		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
26 Ridgecrest Dr		Wolcott			СТ	06716-2557	0	9/30/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution assoc		1^	Yes	
Pres and CEO		Waterbu Commer	ry Regional Chambe ce	r of		fundraising event listed i  If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Evanting	Louisletier		t child of a lob Yes	-		\$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	Т	i cs	INO				<u> </u>

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING DO											
Dan Malloy For Connecticut (C	T)							Origina	al 10/13/2009		
		B. Itemized Contributi	ions fron	ı Individu	ıals		•				
Last Name	First Name		MI	Method of	contribution:	I	Contribution	ID#	Amount of		
Vaz	John		Р	Cash Money	y Order		1818		Contribution		
Residential Street Address		City		State	Zip Code		te Received				
380 Hitchcock Rd Unit 263		Waterbury		СТ	06705-3963	09	/30/2009				
Principal Occupation n/a		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event # 093		? <u> </u>				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00		
Last Name Riddick	First Name Vernon		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1819	ID#	Amount of Contribution		
Residential Street Address 81 Mountain Laurel Dr	•	City Waterbury	•	State CT	Zip Code 06704-1266		te Received /30/2009				
Principal Occupation City of Waterbury		Name of Employer dept. chief of police		•	Is this contribution associa fundraising event listed in If yes, list Event # 093		? <u> </u>				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 50.00	\$50.00		
Last Name Slavin	First Name Michael		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1820	ID#	Amount of Contribution		
Residential Street Address 12 Rolling Ridge Ct		City Prospect		State CT	Zip Code 06712-1737		te Received /30/2009				
Principal Occupation City of Waterbury		Name of Employer law enforcement		•	Is this contribution associa fundraising event listed in If yes, list Event # 093						
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 50.00	\$50.00		
Last Name Corbett	First Name Christoph	er	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 1821	ID#	Amount of Contribution		
Residential Street Address 17 Kenfield Ln		City Waterbury		State CT	Zip Code 06708-1508		te Received /30/2009				
Principal Occupation Police Officer		Name of Employer City Of Waterbury		•	Is this contribution associa fundraising event listed in If yes, list Event # 093	Section J1	? <u> </u>				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 50.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Geary	Joseph				Cash Money	y Order Rersonal Credit/De		1822		Contribution
Residential Street Address	•	City		•	State	Zip Code	Б	ate Received		
26 Greenleaf Ave		Waterbur	<b>'</b> Y		СТ	06705-2709	0	9/30/2009	9	
Principal Occupation		Name of Er	nployer			Is this contribution assoc		1^	Yes	
Director of Operations		City of W	/aterbury			fundraising event listed i  If yes, list Event # 09	n Section . 302009		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribu	tions	
state contractor?  Is yes, indicate which branch or branches of				1 <sup>-</sup>	t child of a lob Yes	•		\$1	.00.00	\$100.00
government the contract is with:		Executive	Legislative	+-				1		
Last Name Noguiera	First Name Paul			MI M	Method of Cash	contribution:	Check	Contributio	on ID#	Amount of Contribution
Nogulei a	raui			l <sup>M</sup>	_	y Order Credit/De		1823		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
272 Sylvan Ave		Waterbur	У		СТ	06706-1644	0	9/30/2009	)	
Principal Occupation		Name of Er	mployer			Is this contribution assoc		1^	Yes	
travel agent		self				fundraising event listed i  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	bbyist?	Aggre	egate Contribu \$	tions 50.00	\$50.00
government the contract is with:		Executive	Legislative	'	res X	No		1		1
Last Name	First Name Fernando			MI	Method of Cash	contribution:	Check	Contributio	on ID#	Amount of
Spagnolo	remando					y Order Credit/De		1824		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
19 Valley Rd		Warren			СТ	06777-2119	0	9/30/2009	9	
Principal Occupation		Name of Er				Is this contribution assoc fundraising event listed i		J1?	Yes	
police officer		City of v	/aterbury			If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of				Î	t child of a lob	•		-	50.00	\$50.00
government the contract is with:		Executive	Legislative		res X	No		1		
Last Name	First Name			MI		contribution:	Chaole	Contributio	on ID#	Amount of
Jannetty	Domenic			J	Cash Money	y Order Credit/De		1825		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
PO Box 4456		Waterbur	У		СТ	06704-0456	0	9/30/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution assoc fundraising event listed i		1^	Yes	
marshall		self				If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis	-	Aggre	gate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of					t child of a lob	•		\$1	.00.00	\$100.00
government the contract is with:	니	Executive	Legislative		res X	No				

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE FILING I												
Dan Malloy For Connecticut (C	T)						Origin	nal 10/13/2009				
B. Itemized Contributions from Individuals												
Last Name Hobart	First Name Brian		MI T	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1826	tion ID#	Amount of Contribution				
Residential Street Address 27 State St		City Waterbury		State CT	Zip Code 06702-1901	Date Receive 09/30/20						
Principal Occupation State Marshall		Name of Employer self			Is this contribution association fundraising event listed in If yes, list Event # 093	Section J1?	X Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		tributor a lobbyis lent child of a lol Yes	/ I /	Aggregate Contri	butions \$100.00	\$100.00				
Last Name Belinkie	First Name Benjamin		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1827	tion ID#	Amount of Contribution				
Residential Street Address 955 Main St Apt 707		City Bridgeport		State CT	Zip Code 06604-4336	Date Receive 09/30/20						
Principal Occupation attorney		Name of Employer self		•	Is this contribution association fundraising event listed in If yes, list Event # 093	Section J1?	Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No		tributor a lobbyis dent child of a lol Yes	-	Aggregate Contri	butions \$100.00	\$100.00				
Last Name Ubaldi	First Name Joseph		MI	Cash	contribution:    X   Personal C	heck 1828	tion ID#	Amount of Contribution				
Residential Street Address 94 Clough Rd		City Waterbury		State CT	Zip Code 06708-1800	Date Receive						
Principal Occupation  consultant		Name of Employer Self Employed			Is this contribution association fundraising event listed in If yes, list Event # 093	Section J1?	X Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		tributor a lobbyis dent child of a lol Yes		Aggregate Contri	butions \$100.00	\$100.00				
Last Name Gardino	First Name Jerry		MI P	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1829	tion ID#	Amount of Contribution				
Residential Street Address 1940 E Main St		City Waterbury		State CT	Zip Code 06705-1815	Date Receive 09/30/20						
Principal Occupation Owner		Name of Employer Garmac Screw Machines			Is this contribution association fundraising event listed in If yes, list Event # 093	Section J1?	X Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		tributor a lobbyis dent child of a lol Yes	-	Aggregate Contri	butions \$100.00	\$100.00				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. Ite	emized Contributi	ons fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Lanza	Charles				Cash Money	y Order X Personal C		1830		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
27 Homewood Pl		Wolcott			СТ	06716-2543	0	9/30/2009	)	
Principal Occupation  sole proprietor		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 09		11?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name Glicksman	First Name Jeanette			MI	x Cash	contribution: Personal C		Contributio	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
1097 Johnson Rd		Woodbrid	lge		СТ	06525-2618	0	9/30/2009	)	
Principal Occupation Town of Woodbridge		Name of En Registra	nployer r of Voters		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut	tions 20.00	\$20.00
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Masselli	Mark			А	Cash Money	y Order Personal C		1834		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
110 Washington St		Middletov	vn		СТ	06457-2818	0	9/30/2009	)	
Principal Occupation executive		Name of En	nployer nity Health Center, Ir	nc.		Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut \$1	tions 00.00	\$100.00
Last Name	First Name			MI	1	contribution:	1	Contributio	n ID#	
Barker	Mary Lee				x Cash	Personal C		1835	m 1D #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
18 Lorraine Dr		Woodbrid	lge		СТ	06525-2417	0	9/30/2009	)	
Principal Occupation  Deputy Registrar		Name of En Town of	nployer Woodbridge			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut	tions 20.00	\$20.00
government the contract is with:		LACCUUVE	Legislative	Т ,	ت د.	110	1			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals		•		
Last Name	First Name			MI	Method of	contribution:		Contributio	n ID#	Amount of
Ciarleglio	Stephanie	•			Cash Money	y Order X Personal C		1836		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
166 Center Rd		Woodbrid	lge		СТ	06525-1838	0	9/30/2009	)	
Principal Occupation Town Clerk		Name of En	nployer Woodbridge			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	tions 25.00	\$25.00
Last Name Sheehy	First Name Edward			MI M	x Cash	contribution:		Contributio	n ID#	Amount of Contribution
		1			Money	y Order Credit/De				
Residential Street Address 7 Bunker Hill Rd		City Woodbrid	lae		State CT	Zip Code 06525-2508		ate Received 9/30/2009	)	
Principal Occupation		Name of Er			1	Is this contribution associ			Yes	İ
First Selectman			Woodbridge			fundraising event listed in If yes, list Event #		J1?	No No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	tions 20.00	\$20.00
Last Name	First Name			MI		contribution:		Contributio	n ID#	Amount of
Berke	Robert				X Cash Money	Personal C		1838		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
128 N Racebrook Rd		Woodbrid	lge		СТ	06525-1445	0	9/30/2009	)	
Principal Occupation Attorney		Name of Er self	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		I1?	Yes No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t spouse or	1 4 0 0 0 0	vaata Cantribu	tions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	dependent	child of a lob	byist?	Aggre	gate Contribu	20.00	\$20.00
Last Name	First Name			MI	Method of	contribution:	-	Contributio	n ID#	Amount of
Weinstein	Andrea				Cash Money	y Order X Personal C		1840		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11 Cross Hollow Rd		Woodbrid	lge		СТ	06525-2511	0	9/30/2009	)	
Principal Occupation Rehabilitation Counselor		Name of En				Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	tions 15.00	\$15.00
government the contract is with:	Ц	Executive	Legislative	_ U _ '	res x	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. It	emized Contribut	ions fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID #	Amount of
Shapiro	Adele				Cash Money	y Order		1841		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
58 Ansonia Rd		Woodbrid	dge		СТ	06525-2607	0	9/30/2009		
Principal Occupation n/a		Name of Er	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut \$	ions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID #	Amount of
Coffey	Patricia				Cash Money	Personal C  y Order X Credit/Del		1720		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
26 Blake Ave		Clinton			СТ	06413-2331	0	9/30/2009		
Principal Occupation		Name of E	mployer			Is this contribution associ			Yes	
Retired		N/A		-		fundraising event listed in If yes, list Event #	section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut \$	ions 15.00	\$15.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Pullano	Holly			М	Cash Money	y Order Personal C		1843		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
64 Bradley St		North Ha	ven		СТ	06473-1444	0	9/30/2009		
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		<sub>J1?</sub>	Yes	
n/a		student				If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	, 1	Aggre	egate Contribut	ions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Î	child of a lob	•		\$3	75.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contribution	n ID#	Amount of
Lenoci	Paul				Cash Money	y Order Personal C		1844		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
18 The Circle		Easton			СТ	06612-2015	0	9/30/2009		
Principal Occupation developer		Name of Er	mployer			Is this contribution associ fundraising event listed in If yes, list Event # 10	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	t, spouse, or	1	egate Contribut		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$3	75.00	\$375.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Eagan	Jane				Cash Money	y Order Registration Residue (1) Personal (1		1846		Contribution
Residential Street Address		City		1	State	Zip Code	E	ate Received		
22 Swiss Rd Apt 3		Lake Plac	cid		NY	12946-1147		9/30/2009		
Principal Occupation		Name of Er	mployer		-	Is this contribution associ	ated with	a [	Yes	İ
retired teacher		n/a				fundraising event listed in If yes, list Event #	Section .	J1?	No	
Is contributor a principal of a state contractor state contractor?	or prospective	•	Yes X No		utor a lobbyis t child of a lob		Aggre	egate Contribu		, +25.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	No		4	\$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Capozzi	Frank				Cash Money	y Order X Personal C		1847		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
166 Birchwood St		Waterbur	У		СТ	06708-3338	0	9/30/2009	9	
Principal Occupation		Name of Er	mployer			Is this contribution associ		1^	Yes	
City of Waterbury		Police Of	ficer			fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	bbyist?	Aggre	egate Contribu	tions 50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	on ID #	Amount of
O'Leary	Neil			М	Cash Money	y Order X Personal C		1848		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
137 Eastridge Dr		Waterbur	У		СТ		0	9/30/2009	9	
Principal Occupation		Name of Er				Is this contribution associ		a x	Yes	
Police Chief		Town of	Waterbury			fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of			_	Î	child of a lob	•		-	100.00	\$100.00
government the contract is with:		Executive	Legislative		res X	No		1		
Last Name	First Name			MI		contribution:	"hook	Contributio	on ID #	Amount of
Olson	Gary				Cash Money	y Order Credit/De		1849		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
125 Cedar Heights Rd		Stamford			СТ	06905-1011	0	9/30/2009	9	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
sales		Strauss	Paper Co.			If yes, list Event #	. 1000000	x	No	
Is contributor a principal of a state contractor	or prospective	-	Yes X No		utor a lobbyis		Aggre	egate Contribu	itions	[
state contractor? Is yes, indicate which branch or branches of		Emany!	Transition of		child of a lob	•		\$3	375.00	\$375.00
government the contract is with:		Executive	Legislative	,	es	INO	1			1

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Dan Malloy For Connecticut (C	T)								Origina	al 10/13/2009
		B. Itemi	zed Contributio	ons from	Individu	ıals				
Last Name Rodriguez	First Name Elizabeth			MI	Cash	contribution:    X   Personal C		Contribution 1850	on ID#	Amount of Contribution
Residential Street Address 89 Alvord St		City Stratford			State CT	Zip Code 06614-3102		ate Received 9/30/200		
Principal Occupation controller		Name of Employ AFB Constru	<sup>ver</sup> ction Managemer	nt	•	Is this contribution associ fundraising event listed in If yes, list Event # 10			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations 375.00	\$375.00
Last Name Lehn	First Name David			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 1852	on ID#	Amount of Contribution
Residential Street Address 19B Woodland Dr		City Greenwich			State CT	Zip Code 06830		ate Received 9/30/200		
Principal Occupation attorney		Name of Employ Withers Berg				Is this contribution associ fundraising event listed in If yes, list Event # 10	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 250.00	\$250.00
Last Name Mccarthy	First Name James			MI L	Cash	contribution:    X   Personal C		Contribution 1853	on ID#	Amount of Contribution
Residential Street Address 11 Adirondak Trl		City Easton			State CT	Zip Code 06612-2051		ate Received		
Principal Occupation supervisor		Name of Employ American Bo				Is this contribution associ fundraising event listed in If yes, list Event # 10	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 250.00	\$250.00
Last Name Vetro	First Name Matthew			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 1854	on ID#	Amount of Contribution
Residential Street Address 20 Scattergood Cir		City Trumbull			State CT	Zip Code 06611-2133		ate Received 9/30/200		
Principal Occupation real estate		Name of Employ self	ver			Is this contribution associ fundraising event listed in If yes, list Event # 10	n Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 250.00	\$250.00

	I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals		,		
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Santoro	Glenn			А	Cash Money	y Order X Personal C		1856		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
26 Wyndham Ln		Farmingt	on		СТ	06032-2758	0	9/30/2009	9	
Principal Occupation Attorney		Name of Er Robinson				Is this contribution associ- fundraising event listed in If yes, list Event # 09.			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name Ferguson	First Name William			MI	Cash	contribution:  Personal C  y Order  X Credit/Del		Contribution 1774	on ID#	Amount of Contribution
Residential Street Address		City		•	State	Zip Code		ate Received	`	
1130 Connecticut Ave NW Ste 300	<u> </u>	Washingt			DC	20036-3981		9/30/2009		
Principal Occupation  consultant		Name of Er the fergi	nployer uson group			Is this contribution associ- fundraising event listed in If yes, list Event #		un?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name Wells	First Name			MI	Method of Cash	contribution:	Check	Contributio	on ID#	Amount of Contribution
Weile	Joug.do				_	y Order X Credit/Del	bit Card	1749		Contribution
Residential Street Address  18 Lakewood Cir N		City Greenwic	:h		State CT	Zip Code 06830-7119		ate Received 9/30/2009	)	
Principal Occupation		Name of Er	nployer		!	Is this contribution associ	ated with	a [	Yes	İ
lawyer		self	. ,			fundraising event listed in If yes, list Event #	Section .	1?	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$3	itions 375.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Buck	Karen				Cash Money	Personal C  X Credit/Del		1776		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
37 Westwood Dr		Waterfor	d		СТ	06385-3826	0	9/30/2009	)	
Principal Occupation RN/Director		Name of En	<sup>nployer</sup> e & Memorial Hospit	al		Is this contribution associ- fundraising event listed in If yes, list Event #		u? <b>_</b>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Eng. C	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$2	tions 250.00	\$250.00
government the contract is with:	Ш	Executive	Legislative	<u>, L , </u>	Yes X	N0				1

	I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Stanley	William			А	Cash Money	Personal (  x Credit/De		1772		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
37 Westwood Dr		Waterford	d		СТ	06385-3826	0	9/30/2009	)	
Principal Occupation  VP, Development		Name of Er Lawrence	nployer e & Memorial Hospita	al		Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	<u> </u>	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	tions 250.00	\$250.00
government the contract is with:		Executive	Legislative	+-			<u> </u>	1		
Last Name Yamin	First Name Joseph			MI P	x Cash	contribution: Personal ( y Order Credit/De		Contributio	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
394 Watertown Rd		Middlebu	ry		СТ	06762-1507	0	9/30/2009	)	
Principal Occupation		Name of En	mployer			Is this contribution associ		1^	Yes	
attorney		self		_		fundraising event listed in  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	tions 350.00	\$100.00
Last Name	First Name			MI		contribution:		Contributio	on ID#	Amount of
D'Orso	Joseph				X Cash Money	y Order Personal C		1797		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
20 America St		Waterbur	У		СТ	06708-4109	0	9/30/2009	<del></del>	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		in?	Yes	
sales		Sanofi-A	ventis			If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	•	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	tions	\$50.00
government the contract is with:	. ⊔	Executive	Legislative		res X	No				
Last Name	First Name			MI		contribution:	31 1	Contributio	on ID#	Amount of
D'Orso	Joseph				Cash Money	y Order Credit/De		1832		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
20 America St		Waterbur	<b>'</b> Y		СТ	06708-4109		9/30/2009		
Principal Occupation sales		Name of En				Is this contribution associ fundraising event listed in If yes, list Event # 09	n Section .		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	tions	\$50.00
government the contract is with:	Ц	Executive	Legislative	<u> </u>	res X	No				

	I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE		
Dan Malloy For Connecticut (C	T)						Origin	al 10/13/2009		
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name D'Orso	First Name Christian		MI	Cash	contribution:    X   Personal Cl	neck 1799	tion ID#	Amount of Contribution		
Residential Street Address 78 Arline Dr		City Waterbury		State CT	Zip Code 06705-3503	Date Receive 09/30/20				
Principal Occupation  Consultant		Name of Employer  J. DAmelia & Associates			Is this contribution associa fundraising event listed in If yes, list Event # 093	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$150.00	\$50.00		
Last Name Crozier	First Name James		MI R	Cash	contribution: Personal Cl  Order X Credit/Debi	neck 1752	tion ID#	Amount of Contribution		
Residential Street Address 975 Still Hill Rd		City Hamden		State CT	Zip Code 06518-1108	Date Receive 09/30/20				
Principal Occupation Accountant		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$750.00	\$375.00		
Last Name Pinto	First Name Antonio		MI P	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck 1831	tion ID#	Amount of Contribution		
Residential Street Address 35 Field St Fl 3		City Waterbury		State CT	Zip Code 06702-1925	Date Receive 09/30/20				
Principal Occupation Account Executive		Name of Employer UnitedHealthcare			Is this contribution associa fundraising event listed in If yes, list Event # 093	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$150.00	\$100.00		
Last Name Curry	First Name Carolanne	9	MI	Cash	contribution: Personal Cl  / Order X Credit/Deb	neck 1756	tion ID#	Amount of Contribution		
Residential Street Address 29 Hiawatha Lane Ext		City Westport		State CT	Zip Code 06880-5812	Date Receive 09/30/20				
Principal Occupation  Mayor's staff		Name of Employer City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob ves	byist?	Aggregate Contri	butions \$425.00	\$175.00		

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							F	FILING	DUE DATE
Dan Malloy For Connecticut (C	T)						(	Origina	1 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Wagner	Carl			Cash Money	y Order X Personal Cl		1768		Contribution
Residential Street Address		City		State	Zip Code	Dat	te Received		
28 Caruso Dr		Watertown		СТ	06795-3069	09,	/30/2009		
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		1^1	Yes	
operations manager		Delmar Electric			_ ~	22009A	11.	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No	1	utor a lobbyis	-	Aggrega	ate Contribution	ons	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		res x	-		\$575	5.00	\$375.00
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Nielsen	Deborah			Cash Money	Personal Cl x Credit/Debi		1750		Contribution
Residential Street Address		City		State	Zip Code	Dat	te Received		
205 Round Hill Rd		Greenwich		СТ	06831-3324	09,	/30/2009		
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in			Yes	
housewife		n/a			If yes, list Event #		x 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No	1	utor a lobbyis	-	Aggrega	ate Contribution	ons	
state contractor? Is yes, indicate which branch or branches of		Executive Legislative	1 <sup>-</sup>	child of a lob	•		\$375	5.00	\$375.00
government the contract is with:	I Firmt Manna	Executive Legislative	<del>                                     </del>			1			
Last Name Curtin	First Name Fay		MI	Cash	contribution: Personal Cl	neck	Contribution I 1754	ID#	Amount of Contribution
		1		Money	y Order X Credit/Debi	it Card	1754		
Residential Street Address		City		State	Zip Code		te Received		
328 Ocean Dr E		Stamford		СТ	06902-8239		/30/2009		
Principal Occupation  Artist		Name of Employer Self			Is this contribution associa fundraising event listed in		, <b>—</b>	Yes	
					If yes, list Event #		X N	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No	1	utor a lobbyis child of a lob	-	Aggrega	ate Contribution		
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		res x	·		\$100	0.00	\$100.00
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Jones-Bronin	R. Elaine			Cash Money	y Order X Credit/Debi		1857		Contribution
Residential Street Address		City	•	State	Zip Code	Dat	te Received		
11 Windabout Dr		Greenwich		СТ	06831-3702	09,	/30/2009		
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in			Yes	
art		self			If yes, list Event #	Jeenon J1	( <b>x</b> 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggrega	ate Contribution	ons	
state contractor? Is yes, indicate which branch or branches of		Executive Legislative		child of a lob	·		\$750	0.00	\$375.00

	I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE									FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)								Origin	al 10/13/2009
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Barbarotta	Sharon				Cash Money	y Order X Personal Credit/De		1851		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
28 Unity Dr		Trumbull			СТ	06611-4929	0	9/30/2009	9	
Principal Occupation invitations business		Name of Er Facility N				Is this contribution association fundraising event listed in If yes, list Event # 10		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	<u> </u>	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	itions 350.00	\$250.00
government the contract is with:	<u></u>	Executive	Legislative	<del>                                     </del>	res X			1		
Last Name Brown	First Name Timothy			MI J	Cash	contribution:  X Personal y Order Credit/De		Contribution 1767	on ID #	Amount of Contribution
Residential Street Address		City		•	State	Zip Code	Е	ate Received		
21 Pearl St		Plainville			СТ	06062-2721	O	9/30/2009	€	
Principal Occupation		Name of Er	nployer			Is this contribution assoc		1^	Yes	
electrician		Delmar I	Electric			fundraising event listed i  If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	bbyist?	Aggre	egate Contribu \$5	tions 525.00	\$375.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Zdrojeski	Ronald			W	Cash Money	y Order		1845		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
47 Papermill Rd		South Gla	astonbury		СТ	06073-2332	0	9/30/2009	<del></del>	
Principal Occupation		Name of Er				Is this contribution assoc fundraising event listed i		J1?	Yes	
Attorney		Robinsor	i & Cole			If yes, list Event # 09			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No		outor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	itions 750.00	\$375.00
government the contract is with:		Executive	Legislative		res X	No				
Last Name	First Name			MI		contribution:	Clarata	Contribution	on ID#	Amount of
Cullinan	Edmond			В	Cash Money	y Order Personal Credit/De		1817		Contribution
Residential Street Address		City			State	Zip Code		ate Received	,	
45 Forest Ridge Rd		Waterbur	У		СТ	06708-1807		9/30/2009		
Principal Occupation Purchasing Manager		Name of Er Hamiltor	nployer Soundstrand			Is this contribution assoc fundraising event listed i If yes, list Event # OS	n Section .	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	•	Yes X No	dependent	outor a lobbyis t child of a lob	bbyist?	Aggre	egate Contribu \$1	itions	\$100.00
government the contract is with:	Ш	Executive	Legislative	_ L L	res X	No				

		I. MONETARY RE	CEIPTS	S (Section	n A-I)		_	
NAME OF COMMITTEE							FILING	G DUE DATE
Dan Malloy For Connecticut (C	T)						Origina	al 10/13/2009
		B. Itemized Contribution	ons from	Individu	ıals			
Last Name Heller	First Name Beth		MI	x Cash	contribution:  Personal C	heck 1839	ution ID #	Amount of Contribution
Residential Street Address 6 Hunters Rdg		City Woodbridge		State CT	Zip Code 06525-1942	Date Recei		
Principal Occupation  Town of Woodbridge Board of Selectman		Name of Employer n/a		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cont	ributions \$20.00	\$20.00
Last Name Olson	First Name Jill		MI	Cash	contribution: Personal Contribution:  y Order  X Credit/Deb	heck 1759	ution ID #	Amount of Contribution
Residential Street Address 44 Mayo Ave		City Greenwich		State CT	Zip Code 06830-7022	Date Recei		
Principal Occupation homemaker		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cont	ributions \$375.00	\$375.00
Last Name De Toledo	First Name Victoria		MI	Cash	contribution:  Personal Contribution:  Very Order  X  Credit/Deb	heck 1785	ution ID #	Amount of Contribution
Residential Street Address 72 Seir Hill Rd		City Wilton		State CT	Zip Code 06897-4207	Date Recei		
Principal Occupation attorney		Name of Employer casper & de toledo			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cont	ributions \$250.00	\$250.00
						Total	of Section B	\$103,598.00
TOTAL OF ALL CONTRIBU	JTIONS FI	ROM INDIVIDUALS	(Section	ons A & B	(Total on Line 14	of Summary Pag	re)	\$103,598.00

I. I	MONE	TAl	RY RECEIP	ΓS (S	ection A-I)			
NAME OF COMMITTEE							FILING	DUE DATE
Dan Malloy For Connecticut (CT)							Original	10/13/2009
C1. Co	ntributi	ons	from Other Co	ommit	tees			
Name of Committee Manus PAC					Name of Treasurer David D. McClu	uskey		
Address 251 Westport Ter			Is this contribution a fundraising event I			Yes If yes, list Event	t #	Amount of Contribution
City West Hartford	State CT	Zip (			eceived 1/2009	Aggregate Contributions	\$375.00	\$375.00
Name of Committee Democrats For Southeastern Connecticut					Name of Treasurer Joseph M. Filip	petti		
Address 11 Hillcrest Dr			Is this contribution a fundraising event l			Yes If yes, list Event X No	t #	Amount of Contribution
City Waterford	State	Zip (		Date R	eceived 1/2009	Aggregate Contributions	\$375.00	\$375.00
Name of Committee Leadership In Action					Name of Treasurer Jacquelin B. He	eftman		
Address PO Box 16878			Is this contribution a fundraising event I			Yes If yes, list Event	t #	Amount of Contribution
City Stamford	State CT	Zip (		Date R	eceived 1/2009	Aggregate Contributions	\$375.00	\$375.00
						Total of S	Section C1	\$1,125.00

I. MONETA							
NAME OF COMMITTEE				FILIN	NG DUE DATE		
Dan Malloy For Connecticut (CT)				Origi	nal 10/13/2009		
C2. Reimbursements or Payments from other Committees							
Name of Committee			Name of Treasurer				
Address			Date Received		Amount of Receipt		
City	State	Zip Code	Reimbursement for shared expense				
			Payment for goods and services				
Total of Section C2							

	I. MONETARY RECEIPTS (Section	n A-K)				
NAME OF COMMITTEE					FILING	DUE DATE
Dan Malloy For Connecticut (CT)					Origina	1 10/13/2009
	D. Loans Received this Period					
Name of Lender				Source of Louis	Is there a cosigner or Guarantor of	Amount Received
Street Address	City	State	Zip Code	Candidate Individual	this loan? Yes	
Name of Cosigner/Guarantor				Other Committee	No	
Street Address	City	State	Zip Code	Date Received		
	•	-	•	Total of	Section D	•

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE					FILING DUE DATE				
Dan Malloy For Connectic	Original 10/13/2009 Original 10/13/2009								
	E. Personal Funds of the Candidate Received this Period								
Date Received	ate Received Amount Method of Payment  Cash Personal Check Credit/Debit Card								
	Total of Section E								

	I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTE	EE				FILING DUE DATE						
Dan Malloy For Conn	Original 10/13/2009										
	F. Anonymous Contributions										
Date Received	Date Received \$ 1 bills \$ 5 bills \$ 10 bill coins Amount										
	Total of Section F										

I. Monetary Receipts (Section A-I)									
NAME OF COMMITTEE	FILING DUE DATE								
Dan Malloy For Connecticut (CT)	Origi	nal 10/13/2009							
G. Interest from Deposits in Authorized Accounts									
Name of Institution		Date Received		Total Amount Received					
Street Address	City		State	Zip Code					
Total of Section G									

I. MONETARY RECEIPTS (Section A-K)										
NAME OF COMMITTEE				FILING DUE DATE						
Dan Malloy For Connecticut (CT)		Original 10/13/2009								
H. Public Grant Fu										
Purpose of Grant:  Initial  Primary General or Special Election	Supplemental/Independ Primary	ent Expenditure General or Special Election	Date Received	Amount						
Supplemental/Post Election Deficit  General or Special Election	Supplemental/Excess Ex	xpenditure General or Special Election								
			Total of Section	н						

I. MONETARY RECEIPTS (Section A-K)									
NAME OF COMMITTEE FILIT									
Dan Malloy For Connecticut (CT)				Origi	nal 10/13/2009				
I. Miscellaneous Monetary Receipts not Considered Contributions									
Name			saction		Amount Received				
Street Address	City	State	Zip Code						
Description									
Total of Section I									

	II. FUNDRAISING	G EVENT ACTIVITY				
NAME OF					FILING DUE	DATE
COMMITTEE Dan Malloy For Co	onnecticut (CT)				Original 10/13	3/2009
	J1. Fundra	nising Event Information			•	
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
Date of Fundraiser Letter 07/21/2009 A	Cocktail Event	112 Bedford St	Stam	ford	СТ	06901
Was this fundraising event h	osted at a personal residence?		Yes	X No		
Did this fundraiser include it items donated by an individu	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	e, auction, or other sale of donated items?		Yes	x No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
09/21/2009 A	Cocktail Event	201 Tresser Blvd	Stam	ford	СТ	06901-3435
Was this fundraising event h	osted at a personal residence?		Yes	X No		
Did this fundraiser include it items donated by an individu	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	e, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
09/22/2009 A	Cocktail Event	183 Harbor Dr	Stam	ford	СТ	06902-7405
Was this fundraising event h	osted at a personal residence?		Yes	X No		
Did this fundraiser include it items donated by an individu	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	e, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
09/23/2009 A	Cocktail Event	37 Westwood Dr	Water	rford	СТ	06385-3826
Was this fundraising event h	osted at a personal residence?		X Yes	No		
Did this fundraiser include it items donated by an individu	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	e, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
Date of Fundraiser Letter 09/24/2009 A	Cocktail Event	280 Trumbull St	Hartfo	ord	СТ	06103-3509
Was this fundraising event h	osted at a personal residence?		Yes	x No		
Did this fundraiser include it items donated by an individu	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	e, auction, or other sale of donated items?		Yes	X No		

	II. FUNDRAISING	G EVENT ACTIVITY				
NAME OF					FILING DUE	DATE
COMMITTEE Dan Malloy For Co	onnecticut (CT)				Original 10/13	/2009
	J1. Fundra	ising Event Information			•	
Fundraising Event #	Description	Location: Street Address	City		State	Zip Code
Date of Fundraiser Letter 09/25/2009 A	Cocktail Event	26 Mill River St	Sta	mford	СТ	06902-3726
Was this fundraising event he	osted at a personal residence?		Yes	X No	•	
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
09/29/2009 A	Cocktail Event	100 Stony Creek Rd	Bra	nford	СТ	06405-3236
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
09/30/2009 A	Cocktail Event	1 Oronoke Rd	Wa	terbury	СТ	06708-3314
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
10/08/2009 A	Cocktail Event	377 N State St	Sta	mford	СТ	06901-3827
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		

II. FUNDRAISING EVENT ACTIVITY									
NAME OF COMMITTEE						FILING	G DUE DATE		
Dan Malloy For Connecticut (CT)  Original									
J2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items									
Name of the Purchaser Last Name (Individuals ONLY)	First Name	MI N	Method of payment:  Cash Per	rsonal Check	it Card	Aggregate Amount of Purchases			
Residential Street Address	City	State	Zip Code	Date Received	Event #				
Items Purchased									
				т	otal of Sec	etion I2			

II. FUNDRAISING EVENT ACTIVITY									
NAME OF COMMITTEE							FILING	G DUE DATE	
Dan Malloy For Connecticut (CT)						Origin	al 10/13/2009		
J3. In-Kind Donations Not Considered Contributions									
Name of the Donor  Mr. William A. Stanley				- 1.	Donation Gi	_	ess Entity	Fair Market Value of Donation	
Street Address 37 Westwood Dr	City Waterford	State Zip CCT 0638			ode 5-3826	Aggregate value for this even			
Description of Donation for houseparty on 9/23/2009			Date Received 09/29/2009		Event # 092309A			\$385.00	
						Total of Se	ction J3	\$385.00	

	III. N	NON	MO	NETARY RECEIPTS					
NAME OF COMMITTEE								FILING I	DUE DATE
Dan Malloy For Connecticu	t (CT)							Original	I 10/13/2009
	К. 1	In-K	ind (	Contributions					
Name							Date Receive	ed	Fair Market Value of this Contribution
Street Address		C	City		State	Zip Code			
Type of Contributor: Individual Committee	Is Contributor a lobbyist, spouse, or dependent child of a lobbyist?		Yes No	Is contributor a principal of a state contra contractor?  If yes, indicate which branch or branches government the contract is with:	s, indicate which branch or branches of			Yes No Legislative	
Is this contribution associated with a fundalisted in Section II? If yes, list Event#		Yes No	Des	cription of In-Kind Contribution			Aggregate contr	ributions	
							Total of	f Section K	

III. Non Monetary Receipts										
NAME OF COMMITTEE	FILING DUE DATE									
Dan Malloy For Connecticut (CT)	Original 10/13/2009									
L. Refundable Deposit to Telephone Company										
Last Name ( Individuals Only )	First Name			MI	Date Received		Amount of Deposit			
Street Address	City	City State Zi		Zip Code						
Name of Telephone company										
Street Address		City			State	Zip Code				
Total of Section L										

III. NONMONETARY RECEIPTS											
NAME OF COMMITTEE	FILI	FILING DUE DATE									
Dan Malloy For Connecticut (CT)				Orig	ginal 10/13/2009						
M. Non-Monetary Receipts of Organization Expenditures Made By Legislative Leadership, Legislative Caucus, and Party Committee											
Name of Committee											
Street Address			Date Notice Received		Fair Market Value of Donation						
City	State	Zip Code Aggregate Donations									
Description of Donation	Purpose of Expenditure  A B	C D	Е								
Total of Section M											

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				-	
Name of Payee  Complete Campaigns  Street Address  3635 Ruffin Rd Fl 3	City	State CA	Zip Code 92123-1880	Date of Payment 07/01/2009 Purpose of Expenditure WEB	Method of Payer Check #		Amount
Description	San Diego	CA	92123-1860	WEB	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$697.25
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				07/02/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	Other Candidate(s) N	lame		Office Sought			445.00
X No				T	1		\$15.00
Name of Payee The Harty Press, Inc.				Date of Payment 07/02/2009	Method of Pay	ment	Amount
, .	C'.	L			X Check # 1135		
Street Address PO Box 324	City  New Haven	State CT	Zip Code 06513-0324	Purpose of Expenditure PRNT	Debit Car	rd	
Description			1	1	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$2,000.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee The Harty Press, Inc.				Date of Payment 07/02/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1133</u>		
PO Box 324	New Haven	СТ	06513-0324	PRNT	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$611.20
X No				<u> </u>	I		φ011.20
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Enovai, Inc.				07/02/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1136</u>		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	rd	
Description			•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$14,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto				07/03/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought	l		
which reimbursement is sought? Yes No	_						\$1,653.84

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ittee				•	
Name of Payee Katharine S. Urbank				Date of Payment 07/03/2009	Method of Pay	ment	Amount
Street Address 227 Brookdale Rd	City Stamford	State CT	Zip Code 06903-4118	Purpose of Expenditure WAGE	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	Name		Office Sought			\$830.77
X No					1		1
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				07/03/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	Name		Office Sought			
X No							\$271.27
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				07/06/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	Name		Office Sought			
Yes X No							\$5.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	1			07/08/2009	Check #		
Street Address 3635 Ruffin Rd Fl 3	City San Diego	State CA	Zip Code 92123-1880	Purpose of Expenditure OVHD	X Debit Car	rd	
Description	Sail Diego	<u>C</u>	32123 1000	OVIID	Event #		
					E (Citt		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$500.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Clarke American Checks, Inc.				07/08/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
10931 Laureate Dr	San Antonio	TX	78249-3350	BNK	X Debit Car	rd	
Description			•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$66.92
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Charles Firlotte				07/08/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1140		
1182 Prospect Dr	Stratford	СТ	06615-7946	REF	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	iame		Office Sought			
Yes X No							\$375.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Henry Ashforth III Street Address 22 Spectacle Ln	City Ridgefield	State CT	Zip Code 06877-5714	Date of Payment 07/08/2009 Purpose of Expenditure REF	Method of Payer  X Check #  1137  Debit Car		Amount
Description  Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	lame		Office Sought	Event #		
which reimbursement is sought?  Yes  No							\$375.00
Name of Payee William Fitzpatrick IV				Date of Payment 07/08/2009	Method of Paye	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1141</u>		
61 Pleasant St	Waterbury	СТ	06706-1326	REF	Debit Car	<sup>r</sup> d	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$375.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Harris Simons	City	Gr. i	7' 0 1	07/08/2009	X Check # 1150		
Street Address  12 Brenway Dr	City West Hartford	State CT	Zip Code 06117-3054	Purpose of Expenditure REF	Debit Car	rd	
Description	- West Hartford	<u> </u>	1		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$375.00

	IV. EXPENDITURES	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee  Mr. Bruce Simons  Street Address  3 Squirrel Hill Rd  Description	City West Hartford	State CT	Zip Code 06107-1004	Date of Payment 07/08/2009 Purpose of Expenditure REF	Method of Payr  X Check #  1146  Debit Car  Event #		Amount
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$375.00
Name of Payee Juan Velez				Date of Payment 07/08/2009	Method of Payı	ment	Amount
Street Address 42 Forest Lawn Ave	City Stamford	State CT	Zip Code 06905-4305	Purpose of Expenditure REF	1149 Debit Car	ď	
Description					Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$375.00
Name of Payee Sharon Phillips				Date of Payment 07/08/2009	Method of Payr	ment	Amount
Street Address 6 Hycliff Rd	City Greenwich	State CT	Zip Code 06831-3223	Purpose of Expenditure FNDR	1145 Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$1,189.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Columbus Park Trattoria  Street Address  205 Main St	City Stamford	State	Zip Code 06901-2918	Date of Payment 07/08/2009 Purpose of Expenditure FNDR	Method of Pays  X Check #  1138  Debit Car		Amount
Description	Stamoru	<u> </u>	00301 2310	INDIX	Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	Jame		Office Sought			\$1,500.00
Name of Payee  Kagan Architecture and Planning				Date of Payment 07/08/2009	Method of Pay	ment	Amount
	Cit.	g	7: 0.1		X Check # 1143		
Street Address 370 James St Ste 401	City New Haven	State CT	Zip Code 06513-3091	Purpose of Expenditure FNDR	Debit Car	·d	
Description	New Haven	<u>  -                                   </u>	00010 0001	<u> </u>	Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$179.94
Name of Payee Mr. Stanton Lesser				Date of Payment 07/08/2009	Method of Pay	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1144		
85 Split Rock Rd # 219	Southport	СТ	06890-1266	FNDR	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	Iame		Office Sought			\$127.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Barbara Garvin-Kester	Cin	G	7: 0.1	Date of Payment 07/08/2009	Method of Pays  X Check #  1142	ment	Amount
Street Address 50 Forest St	City Stamford	State CT	Zip Code 06901-1848	Purpose of Expenditure REF	Debit Car	·d	
Description	Stamora		1		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$100.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Mr. Robert A Simons		I		07/08/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1148   Debit Car	v4	
115 High Ridge Rd	West Hartford	СТ	06117-1815	REF	_	u	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			<b>4275.00</b>
X No							\$375.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex		I		07/10/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	X Debit Car	vd.	
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE		u	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	!		
X No							\$107.85

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				07/13/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$17.75
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				07/16/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	<sup>-</sup> d	
Description		-	ł	'	Event #		
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	Jame.		Office Sought			
which reimbursement is sought?	omer cundidate(s).			omee sough			
Yes X No							\$30.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				07/17/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	]		
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$271.27

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Katharine S. Urbank				Date of Payment 07/17/2009	Method of Pay	ment	Amount
Street Address	City	State CT	Zip Code 06903-4118	Purpose of Expenditure WAGE	X Debit Car	d	
227 Brookdale Rd  Description	Stamford	СТ	06903-4118	WAGE	Event #	<u> </u>	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  X  No	or Other Candidate(s) N	lame		Office Sought			\$830.77
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew J Zagaja	r		1	07/17/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1153		
12 Cornish Rd	Wethersfield	СТ	06109-1415	CNSLT	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	Other Candidate(s) N	lame		Office Sought	•		
X No							\$400.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
The Harty Press, Inc.	Т		1	07/17/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1159</u>		
PO Box 324	New Haven	СТ	06513-0324	PRNT	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			4000 12
X No							\$908.42

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee The Harty Press, Inc.				Date of Payment 07/17/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1158</u>		
PO Box 324	New Haven	СТ	06513-0324	PRNT	Debit Car	d d	
Description		•	•	•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$1,473.50
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto				07/17/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1161</u>		
215 Oxford St	Hartford	СТ	06105-2249	RCW	Debit Car	d	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$405.05
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto				07/17/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
x No							\$1,653.84

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Dara K Kovel  Street Address  85 Livingston St	City New Haven	State	Zip Code 06511-2409	Date of Payment 07/17/2009 Purpose of Expenditure REF	Method of Payer  X Check #  1162  Debit Car		Amount
Description	New naven	Ci	00311 2409	INC.	Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$100.00
Name of Payee  Anthem Blue Cross and Blue Shield				Date of Payment 07/17/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1155		
PO Box 11017	Lewiston	ME	04243-9468	WAGE	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$140.64
Name of Payee USPS				Date of Payment 07/17/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1154</u>		
West Avenue Station	Stamford	СТ	06911	OVHD	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			
X No							\$195.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Cablevision of Connecticut				Date of Payment 07/17/2009	Method of Pays	ment	Amount
Street Address PO Box 9256	City Chelsea	State MA	Zip Code 02150-9256	Purpose of Expenditure	1157 Debit Car	·d	
Description Description	Crieisea	111/4	02130 3230	OVIID	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$116.50
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	i			07/20/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d .	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$27.50
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto			T	07/21/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1169	,	
215 Oxford St	Hartford	СТ	06105-2249	WAGE	Debit Car	ď	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
x <sub>No</sub>							\$1,038.01

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Grade A Shoprite				Date of Payment 07/21/2009	Method of Pays	ment	Amount
Street Address 200 Shippan Ave	City Stamford	State CT	Zip Code 06902	Purpose of Expenditure FNDR	1166 Debit Car	·d	
Description			•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	Jame		Office Sought			\$76.98
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew J Zagaja				07/21/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1165		
12 Cornish Rd	Wethersfield	СТ	06109-1415	CNSLT	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$200.00
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Mr. Anthony D. Truglia Esq.			T	07/21/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1168 Debit Car	vd.	
1494 Shippan Ave	Stamford	СТ	06902-7839	REF	<del></del>	u	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$250.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Butterfield8 Lounge			1	Date of Payment 07/21/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1163</u>		
112 Bedford St	Stamford	СТ		FNDR	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$3,648.00
X No				1	1		\$3,048.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Enovai, Inc.				07/22/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1171</u>		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	d d	
Description				•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	other Candidate(s) N	lame		Office Sought			
Yes X No							\$2,080.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
John J Sullivan's				07/22/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1170		
557 Wakelee Ave	Ansonia	СТ	06401-1225	FNDR	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought	•		\$350.00
X No							\$330.00

	IV. EXPENDITURES	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  NBC LEO  Street Address  1301 Pennsylvania Ave NW Ste 550  Description	City Washington	State DC	Zip Code 20004-1747	Date of Payment 07/22/2009 Purpose of Expenditure A-MAG	Method of Payr  X Check #  1174  Debit Car  Event #		Amount
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought?  Yes  No							\$125.00
Name of Payee Butterfield8 Lounge				Date of Payment 07/22/2009	Method of Payr	nent	Amount
Street Address 112 Bedford St	City Stamford	State CT	Zip Code	Purpose of Expenditure	1164 Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$1,374.60
Name of Payee Complete Campaigns				Date of Payment 07/22/2009	Method of Payı  Check #	nent	Amount
Street Address 3635 Ruffin Rd Fl 3	City San Diego	State CA	Zip Code 92123-1880	Purpose of Expenditure WEB	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	Other Candidate(s) N	ame		Office Sought			\$61.50

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Complete Campaigns				Date of Payment 07/24/2009	Method of Paye	ment	Amount
Street Address 3635 Ruffin Rd Fl 3	City San Diego	State CA	Zip Code 92123-1880	Purpose of Expenditure WEB	X Debit Car	rd	
Description	Tour Bregg	<u> </u>	1	<u> </u>	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$19.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
JHM Group Of Companies			_	07/27/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1177</u>		
76 Progress Dr	Stamford	СТ	06902-3600	OVHD	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	other Candidate(s) N	lame		Office Sought			
Yes X No							\$500.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
GSG Communications, LLC			<u> </u>	07/27/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1175		
895 Broadway Fl 5	New York	NY	10003-1226	CNSLT	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	Jame		Office Sought	l		
Yes X No							\$6,000.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Franca L DeRosa Street Address	City	State	Zip Code	Date of Payment 07/27/2009 Purpose of Expenditure	Method of Pays  X Check #  1176	ment	Amount
15 Highland St Apt 206	West Hartford	СТ	06119-1378	REF	Debit Car	d	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$100.00
Name of Payee				Date of Payment	Method of Paya	ment	Amount
-				07/28/2009	1		
Matthew J Zagaja	C'.	L	L		X Check # 1178		
Street Address 12 Cornish Rd	City Wethersfield	State CT	Zip Code 06109-1415	Purpose of Expenditure CNSLT	Debit Car	ď	
Description	Wethersheid	<u> </u>	00107 1413	CNSET	Event #		
					Event "		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$200.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Katharine S. Urbank		I		07/28/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1179  Debit Car	d	
227 Brookdale Rd  Description	Stamford	СТ	06903-4118	RCW	<del></del>	u .	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$219.88

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Katharine S. Urbank	1			07/31/2009	Check #		
Street Address 227 Brookdale Rd	City Stamford	State CT	Zip Code 06903-4118	Purpose of Expenditure WAGE	X Debit Car	·d	
Description	Starmord			1	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$830.77
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto				07/31/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	·d	
Description		-	•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	other Candidate(s) N	lame		Office Sought	-		
Yes X No							\$1,653.84
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				07/31/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			100
X No							\$324.93

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Complete Campaigns				Date of Payment 07/31/2009	Method of Pays	ment	Amount
	Cit.	G	7: 0 1		Check #		
Street Address 3635 Ruffin Rd Fl 3	City San Diego	State	Zip Code 92123-1880	Purpose of Expenditure WEB	X Debit Car	ď	
Description	Sall Diego	C/ t	32123 1000		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought			
Yes X No							\$63.75
Name of Payee				Date of Payment	Method of Payı	ment	Amount
People's United Bank			,	07/31/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
350 Bedford St	Stamford	СТ	06901-1741	BNK	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
X No							\$20.65
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Enovai, Inc.	T		1	07/31/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1180		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
X No							\$4,000.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Complete Campaigns  Street Address	City	State	Zip Code	Date of Payment 08/03/2009 Purpose of Expenditure	Method of Pays	ment	Amount
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	OVHD	X Debit Car	rd	
Description	- Com		-		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$500.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew J Zagaja	<b>.</b>	1	1	08/05/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1181</u>		
12 Cornish Rd	Wethersfield	СТ	06109-1415	CNSLT	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$200.00
Name of Payee  Matthew J Zagaja				Date of Payment 08/05/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1182		
12 Cornish Rd	Wethersfield	CT	06109-1415	CNSLT	Debit Car	rd	
Description		ļ.	<u> </u>		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			
X No							\$200.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Paychex				Date of Payment 08/10/2009	Method of Paye	ment	Amount
Street Address 11 Riverbend Dr S	City Stamford	State CT	Zip Code 06907-2524	Purpose of Expenditure WAGE	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	Jame		Office Sought			\$172.45
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Enovai, Inc.				08/11/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1183</u>		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	rd	
Description		•			Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought	l		
X No							\$8,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex		<u> </u>		08/14/2009	Check #		
Street Address	City	State	Zip Code 06907-2524	Purpose of Expenditure WAGE	X Debit Car	rd	
11 Riverbend Dr S  Description	Stamford	СТ	06907-2324	WAGE	Event #		
Description					Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No.							\$271.27

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Committee						
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto				08/14/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	·d	
Description		_	•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	l		
Yes X No							\$1,653.84
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Katharine S. Urbank				08/14/2009	Check #		
	City	State	Zip Code	Purpose of Expenditure	Check #		
Street Address  227 Brookdale Rd	Stamford	CT	06903-4118	WAGE	X Debit Car	·d	
Description	- Commona		ļ	1	Event #		
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought	•		
which reimbursement is sought? Yes	.,						
X No							\$830.77
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	_			08/16/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	<sup>r</sup> d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$7.50

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ittee					
Name of Payee  Matthew Gianquinto  Street Address	City	State	Zip Code	Date of Payment 08/17/2009 Purpose of Expenditure	Method of Payr  X Check #  1186		Amount
215 Oxford St	Hartford	СТ	06105-2249	RCW	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	or Other Candidate(s) N	Jame		Office Sought			\$167.55
Name of Payee				Date of Payment	Method of Payi	ment	Amount
Dimitar Naydenov				08/17/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1185		
670 Mix Ave Apt 5D	Hamden	СТ	06514-2343	RCW	Debit Car	d	
Description	l		!		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
X No							\$18.75
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Clinton Democratic Town Committee	Τ	1	_	08/17/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1187		
c/o Willie Fritz 30 Sunnybrook Ln	Clinton	СТ	06413	ATT *	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	or Other Candidate(s) N	Vame		Office Sought			\$100.00
X No							i

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Cablevision of Connecticut				Date of Payment 08/17/2009	Method of Paye	ment	Amount
Street Address PO Box 9256	City Chelsea	State MA	Zip Code 02150-9256	Purpose of Expenditure OVHD	1184  Debit Car	rd	
Description	Cheisea	, .	02130 3230	OVIID	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$104.37
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Enovai, Inc.	1		1	08/18/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1188		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	•		
X No							\$4,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	T	_	Τ	08/19/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	 		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	·d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
x No							\$24.25

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Enovai, Inc.				Date of Payment 08/21/2009	Method of Pays	ment	Amount
Street Address 1131 Tolland Tpke Ste O	City Manchester	State CT	Zip Code 06042-1679	Purpose of Expenditure WEB	1193 Debit Car	rd	
Description	Transference			<u> </u>	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought			
Yes X No							\$4,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				08/24/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	<sup>-</sup> d	
Description					Event #		
Is this expenditure coordinated with another candidate for	or Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought? Yes X No							\$7.50
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Ronald Malloy				08/25/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1189		
111 Downs Ave	Stamford	СТ	06902-7802	REF	Debit Car	d d	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
x <sub>No</sub>							\$25.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
N. Expenses Paid By Committee							
Name of Payee GSG Communications, LLC				Date of Payment 08/25/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1191</u>		
895 Broadway Fl 5	New York	NY	10003-1226	CNSLT	Debit Car	rd	
Description		•	•	•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$6,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Anthem Blue Cross and Blue Shield				08/25/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1190</u>		
PO Box 11017	Lewiston	ME	04243-9468	WAGE	Debit Car	·d	
Description				•	Event #		
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	lame		Office Sought	•		
which reimbursement is sought? Yes X No							\$140.64
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				08/27/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u></u>		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$18.75
X No							1

	IV. EXPENDITURE	S						
NAME OF COMMITTEE						FILE	NG DUE DATE	
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009	
	N. Expenses Paid By Committee							
Name of Payee				Date of Payment	Method of Pay	ment	Amount	
Paychex			1	08/28/2009	Check #			
Street Address 11 Riverbend Dr S	City	State CT	Zip Code 06907-2524	Purpose of Expenditure WAGE	X Debit Car	d.		
Description Description	Stamford	C1	00307-2324	WAGE	Event #	-		
					Event "			
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought				
Yes X No							\$271.21	
Name of Payee				Date of Payment	Method of Pay	ment	Amount	
Katharine S. Urbank				08/28/2009	Check #			
Street Address	City	State	Zip Code	Purpose of Expenditure				
227 Brookdale Rd	Stamford	СТ	06903-4118	WAGE	X Debit Car	d		
Description					Event #			
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought				
Yes X No							\$830.77	
Name of Payee				Date of Payment	Method of Pay	ment	Amount	
Matthew Gianquinto				08/28/2009	Check #			
Street Address	City	State	Zip Code	Purpose of Expenditure				
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	d		
Description					Event #			
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought				
x No							\$1,653.84	

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Connecticut Young Democrats		ı		Date of Payment 08/31/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1192</u>		
PO Box 260098	Hartford	СТ	06126-0098	ATT *	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$500.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	1			08/31/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d .	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			¢12.50
X No							\$12.50
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Enovai, Inc.	1			09/02/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1195</u>		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$4,000.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
N. Expenses Paid By Committee							
Name of Payee Enovai, Inc.		_		Date of Payment 09/02/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1199</u>		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	ď	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$4,000.00
X No				T	ı		ψ 1,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
CWEALF				09/02/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1194</u>		
75 Charter Oak Ave Ste 1-300	Hartford	СТ	06106-1903	A-MAG	Debit Car	rd	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	Jame		Office Sought			4710.00
X No							\$310.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	T		T	09/03/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	OVHD	X Debit Car	d .	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	Jame		Office Sought			\$500.00
110							

IV. EXPENDITURES								
NAME OF COMMITTEE						FILE	NG DUE DATE	
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009	
	N. Expenses Paid By Commi	ttee						
Name of Payee Katharine S. Urbank Street Address 227 Brookdale Rd Description	City Stamford	State CT	Zip Code 06903-4118	Date of Payment 09/05/2009 Purpose of Expenditure RCW	Method of Pays  X Check #  1198  Debit Car  Event #		Amount	
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought	Event		\$498.04	
Name of Payee				Date of Payment	Method of Pay	ment	Amount	
				09/05/2009	l	inent	Amount	
The Harty Press, Inc.	C'.	L			X Check # 1196			
Street Address PO Box 324	City New Haven	State	Zip Code 06513-0324	Purpose of Expenditure PRNT	Debit Car	·d		
Description	пем пачен	<u> </u>	00313 0324	T KIVI	Event #			
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	Iame		Office Sought				
Yes X No							\$1,017.80	
Name of Payee Paradox Ink				Date of Payment 09/05/2009	Method of Pays	ment	Amount	
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1197</u>			
1042 Broad St	Bridgeport	СТ	06604-4246	A-OTH	Debit Car	d		
Description					Event #			
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No.	r Other Candidate(s) N	lame		Office Sought			\$750.00	

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns				09/08/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	ď	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	I		
Yes X No							\$4.75
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				09/10/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE	X Debit Car	d d	
Description		•	1	'	Event #		
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought	•		
which reimbursement is sought? Yes	· · · · · · · · · · · · · · · · · · ·			J			
X No							\$107.68
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex				09/11/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE	X Debit Car	rd	
Description			-		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$271.21

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee  Matthew Gianquinto				Date of Payment 09/11/2009	Method of Pay	ment	Amount
Street Address 215 Oxford St	City Hartford	State CT	Zip Code 06105-2249	Purpose of Expenditure WAGE	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	Jame		Office Sought			\$1,653.84
X No				Τ	1		\$1,033.04
Name of Payee  Complete Campaigns				Date of Payment 09/11/2009	Method of Pays	ment	Amount
	City	State	Zip Code	Purpose of Expenditure	Check #		
Street Address 3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description	-		1	!	Event #		1
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
X No							\$26.25
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Katharine S. Urbank	·			09/11/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
227 Brookdale Rd	Stamford	СТ	06903-4118	WAGE	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought	ļ.		
Yes X No							\$830.77

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
N. Expenses Paid By Committee							
Name of Payee Ledger Publications			1	Date of Payment 09/11/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1202</u>		
740 N Main St	West Hartford	СТ	06117-2480	A-MAG	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$350.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Sprint				09/11/2009	<u> </u>		
	C't-		7: 0.1		X Check # 1201		
Street Address 307 Connecticut Ave	City Norwalk	State CT	Zip Code 06854-1805	Purpose of Expenditure  OVHD	Debit Car	·d	
Description	Notwark	<u> </u>	00031 1003	01115	Event #		
					Brown "		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$167.55
Name of Payee				Date of Payment	Method of Pay	ment	Amount
JHM Group Of Companies			Τ	09/11/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1203</u>		
76 Progress Dr	Stamford	СТ	06902-3600	OVHD	Debit Car	·d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$500.00
X No							

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Cablevision of Connecticut				Date of Payment 09/11/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1200</u>		
PO Box 9256	Chelsea	MA	02150-9256	OVHD	Debit Car	d	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$99.85
Manage & David				Date of Payment	Method of Pay	mont.	Amount
Name of Payee					l `	nent	Amount
JHM Group Of Companies		Ι		09/12/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1204   Debit Car	d	
76 Progress Dr	Stamford	СТ	06902-3600	OVHD	<del> </del>	<u> </u>	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$500.00
X No				1	1		\$500.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Anthem Blue Cross and Blue Shield	Г			09/14/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1207		
PO Box 11017	Lewiston	ME	04243-9468	WAGE	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$140.64
1 L_1 1NO							

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
N. Expenses Paid By Committee							
Name of Payee Enovai, Inc.				Date of Payment 09/14/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1206</u>		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	<sup>-</sup> d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$4,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Sisters Marketing	<u> </u>		T	09/14/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1205</u>		
550 E Chester St	Long Beach	NY	11561-2413	A-OTH	Debit Car	d .	
Description GIFT Date:					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			12.455.00
X No					1		\$2,455.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	T	_	T	09/17/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$108.70
1 L_1 1NO							

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee The Harty Press, Inc.				Date of Payment 09/20/2009	Method of Pays	ment	Amount
Street Address PO Box 324	City New Haven	State CT	Zip Code 06513-0324	Purpose of Expenditure POST	1209 Debit Car	rd	
Description		ļ.	1		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$890.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Enovai, Inc.	T	1	T	09/20/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1208		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			
X No				T			\$4,000.00
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Ledger Publications		ı		09/20/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1212  Debit Car	vd.	
740 N Main St	West Hartford	СТ	06117-2480	A-MAG		u	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$280.00
No No							i e

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee USPS		1	ı	Date of Payment 09/20/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1216 Debit Car	.a	
West Avenue Station	Stamford	СТ	06911	POST		ď	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$132.00
Name of Payer				Date of Payment	Method of Pay	ment	Amount
Name of Payee					<u> </u>	ment	Amount
Design Intervention, LLC		1		09/21/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1211		
89 Edgecomb St	Mystic	СТ	06355-2409	OVHD	Debit Car	ď	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			105.00
X No							\$954.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
NARAL Pro-Choice Connecticut	1		T	09/21/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1210		
56 Arbor St	Hartford	СТ	06106-1222	A-MAG	Debit Car	<sup>r</sup> d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$250.00
No No							i e

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee CulinArt, Inc Street Address	City	State	Zip Code	Date of Payment 09/23/2009 Purpose of Expenditure	Method of Payer  X Check #		Amount
1979 Marcus Ave Ste E110	New Hyde Park	NY	11042-1002	FNDR	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	or Other Candidate(s) N	lame		Office Sought			\$179.67
Name of Payee				Date of Payment	Method of Pay	ment	Amount
The Saltwater Grille				09/23/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1214		
183 Harbor Dr	Stamford	CT	06902-7405	FNDR	Debit Car	rd	
Description	<u>I</u>		ļ		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
X No							\$567.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
GSG Communications, LLC	<u> </u>	1		09/25/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1217 Debit Car	vd.	
895 Broadway FI 5	New York	NY	10003-1226	CNSLT		u	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	Jame		Office Sought			#C 000 00
X No							\$6,000.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
N. Expenses Paid By Committee							
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Arunan Arulampalam				09/25/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
81 Edwards St	New Haven	СТ	06511-3942	WAGE	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	l		
Yes X No							\$1,153.85
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Glastonbury DTC				09/25/2009	X Check #		
	City	State	Zip Code	Purpose of Expenditure	1223		
Street Address  2205 Main St	Glastonbury	CT	06033-2210	A-MAG	Debit Car	rd	
Description	Glastolibally	<u>  -                                   </u>	00000 1110	J	Event #		
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought	•		
which reimbursement is sought? Yes							
X No							\$150.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Matthew Gianquinto				09/25/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
215 Oxford St	Hartford	СТ	06105-2249	WAGE	X Debit Car	<sup>r</sup> d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$1,653.84

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Complete Campaigns				09/25/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	rd	
Description		_	•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$190.25
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Katharine S. Urbank 09/25/2009					Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	Check #		
227 Brookdale Rd	Stamford	СТ	06903-4118	WAGE	X Debit Car	d d	
Description	1		ļ.		Event #		
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	lame		Office Sought	•		
which reimbursement is sought?  Yes							
x No							\$830.77
Name of Payee				Date of Payment	Method of Paya	ment	Amount
Paychex				09/25/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
11 Riverbend Dr S	Stamford	СТ	06907-2524	WAGE	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$347.12

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Nicholas Buden				Date of Payment 09/28/2009	Method of Payr	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1219</u>		
38 Pinnacle Rd	Plainville	СТ	06062-1430	REF	Debit Car	·d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$150.00
Name of Payee				Date of Payment	Method of Payi	ment	Amount
Complete Campaigns	<u> </u>		T	09/29/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	WEB	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$495.25
X No				<u> </u>	<u> </u>		<u> </u>
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Katharine S. Urbank				09/29/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1222		
227 Brookdale Rd	Stamford	СТ	06903-4118	RCW	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$290.07
No No							

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Enovai, Inc.				Date of Payment 09/29/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1221		
1131 Tolland Tpke Ste O	Manchester	СТ	06042-1679	WEB	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$4,077.50
X No				1	l		
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Sisters Marketing				09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1238		
550 E Chester St	Long Beach	NY	11561-2413	A-OTH	Debit Car	·d	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	Jame		Office Sought			±2,620,00
X No							\$2,630.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
The Country Club Of Waterbury	T		T	09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1235		
PO Box 2123	Waterbury	СТ	06722-2123	FNDR	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$600.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Purdue Pharma, L.P. Street Address	City	State	Zip Code	Date of Payment 09/30/2009 Purpose of Expenditure	Method of Pays  X Check #		Amount
1 Stamford Forum FI 8	Stamford	СТ	06901-3516	FNDR	Debit Car	<sup>r</sup> d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$100.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Ms. Carolanne Curry				09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1234		
29 Hiawatha Lane Ext	Westport	СТ	06880-5812	REF	Debit Car	rd	
Description	<u> </u>		1		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$50.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
James R Crozier	Γ	l .		09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1237 Debit Car	vd.	
975 Still Hill Rd	Hamden	СТ	06518-1108	REF		u	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$375.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee  Robinson & Cole LLP  Street Address	City	State	Zip Code	Date of Payment 09/30/2009 Purpose of Expenditure	Method of Payr  X Check #  1240	ment	Amount
280 Trumbull St	Hartford	СТ	06103-3509	FNDR	Debit Car	·d	
Description			!		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$582.53
Name of Payee				Date of Payment	Method of Paya	ment	Amount
Brian Fitzgerald				09/30/2009	1		
	City	C+-+-	7:- C- 1-		X Check #		
Street Address 40 Fox Run Ln	Greenwich	State CT	Zip Code 06831-3737	Purpose of Expenditure REF	Debit Car	d d	
Description	Greenwen			ļ	Event #		
·							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$375.00
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Kristy Laydon	<u> </u>			09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1243 Debit Car	·d	
28 Grove Hill Rd Description	Woodbridge	СТ	06525-1446	REF	<del></del>	u	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$375.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee L. Christine Laydon Street Address	City	State	Zip Code	Date of Payment 09/30/2009 Purpose of Expenditure	Method of Payer  X Check #	ment	Amount
16 Forest Glen Dr	Woodbridge	СТ	06525-1449	REF	Debit Car	rd	
Description			•	•	Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$375.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Elmer F. Laydon Jr.				09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1241		
16 Forest Glen Dr	Woodbridge	СТ	06525-1449	REF	Debit Car	rd	
Description			1		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$375.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Kyle D Byrne			1	09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1232		
50 Wacona Ave Apt 2D	Waterbury	СТ	06705-1243	REF	Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	or Other Candidate(s) N	lame		Office Sought			\$150.00
1 L_1 1NO							

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee Timothy J Brown Street Address	City	State	Zip Code	Date of Payment 09/30/2009 Purpose of Expenditure	Method of Pays  X Check #  1231	ment	Amount
21 Pearl St	Plainville	СТ	_	REF	Debit Car	rd	
Description			1		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$150.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Verizon Wireless				09/30/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1229</u>		
PO Box 15062	Albany	NY	12212-5062	OVHD	Debit Car	rd	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$509.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Complete Campaigns	T	Π		09/30/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure WEB	X Debit Car	rd	
3635 Ruffin Rd Fl 3	San Diego	CA	92123-1880	MER		u	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	ame		Office Sought			
X No							\$905.75

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Carl Wagner			ı	Date of Payment 09/30/2009	Method of Paye	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1233 Debit Car	.a	
28 Caruso Dr	Watertown	СТ	06795-3069	REF		a	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$200.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
				09/30/2009	l		, into unit
The Harty Press, Inc.	a.	L			X Check #		
Street Address PO Box 324	City	State CT	Zip Code 06513-0324	Purpose of Expenditure PRNT	Debit Car	·d	
Description	New Haven	Ci	00313-0324	FRIVI	Event #	-	
Description					Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$5,022.10
Name of Payee				Date of Payment	Method of Pay	ment	Amount
People's United Bank		Ι		09/30/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	V Duna		
350 Bedford St	Stamford	СТ	06901-1741	BNK	X Debit Car	d	
Description					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No.	r Other Candidate(s) N	lame		Office Sought			\$69.67
LLA L No							I

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Dan Malloy For Connecticut (CT)						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee City Of Stamford				Date of Payment 09/30/2009	Method of Pay	ment	Amount
Street Address 888 Washington Blvd	City Stamford	State CT	Zip Code 06901-2902	Purpose of Expenditure	1228  Debit Car	rd	
Description			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought	•		\$1,124.23
100					Total of Se	ction N	\$144,749.83

	IV.	EXPENDITURES								
NAME OF COMMITTE	EE						FILING	DUE DATE		
Dan Malloy For Connecticut (CT)  Original 10										
	O. Cam	paign Expenses Paid By Candidate								
Name of Payee				Date of Payme		Is Reimbur Claimed?	rsement	Amount		
Street Address		City	State	Zip Code			es			
Purpose of Expenditure	Description				Event #	ŧ				
						Total of	Section O			

NAME OF COMMITTEE						FII	LING DUE DATE	
Dan Malloy For Connecticut (CT)						Ori	Original 10/13/2009	
	•							
Name of Issuing Institution Type of Credit Card:								
			Visa	Master Card	Discover	Americ	can	
Other								
Name of Vendor					Date of Transaction		Amount	
Street Address		City	State	Zip Code				
Purpose of Expenditure	Description		<u> </u>		Event #			
	_							
	Total of Section P							

IV. EXPENDITURES								
NAME OF CO	MMITTEE				FILING DU	E DATE		
Dan Malloy F	For Connecticut (CT)				Original 10	/13/2009		
	Q. Expenses Incurred By Com	nmittee but Not Paid Duri	ng this Period					
Name of Creditor Lisa Theresa's			Date Incurred 09/30/2009	Event #		Amount Incurred (Estimate or		
Street Address 906 W Main St		City Branford	•	State CT	Zip Code 06405-3443	Actual)		
Purpose of Expenditure FNDR	Description  Marcus fundraiser							
Is this expenditure which reimbursemed Yes X No	coordinated with another candidate for Other Candident is sought?	ate(s) Name	Office Sought			\$875.00		
Name of Creditor R. Elaine Jones	s-Bronin		Date Incurred 09/30/2009	Event #		Amount Incurred (Estimate or		
Street Address 11 Windabout	Dr	City Greenwich		State CT	Zip Code 06831-3702	Actual)		
Purpose of Expenditure REF	Description							
Is this expenditure which reimbursemed Yes X No	coordinated with another candidate for Other Candident is sought?	ate(s) Name	Office Sought			\$375.00		

IV. EXPENDITURES									
		ENDITUKES							
NAME OF CO	MMITTEE				FILING	G DUE DATE			
Dan Malloy I	For Connecticut (CT)				Origina	al 10/13/2009			
	Q. Expenses Incurred By Com	nmittee but Not Paid Duri	ng this Period						
Name of Creditor Stony Creek Po	ackage Store		Date Incurred 09/30/2009	Event #		Amount Incurred			
Street Address 3 Thimble Isla	nd Rd	City Stony Creek		State CT	Zip Code 06405	(Estimate or Actual)			
Purpose of Expenditure FNDR	Description  Marcus event								
Is this expenditure which reimbursemed Yes No	coordinated with another candidate for Other Candida ent is sought?	ate(s) Name	Office Sought			\$539.89			
Name of Creditor Greenwich Hos	spitality Gro		Date Incurred 09/30/2009	Event #		Amount Incurred (Estimate or			
Street Address 26 Mill River S	t	City Stamford		State CT	Zip Code 06902-37	Actual)			
Purpose of Expenditure FNDR	Description								
Is this expenditure which reimbursement Yes  X No	coordinated with another candidate for Other Candidate for other Candidate for Other C	ate(s) Name	Office Sought			\$265.00			
	-			Total o	f Section Q	\$2,054.89			

IV. E	XPENDITURES						
NAME OF COMMITTEE					FILI	FILING DUE DATE	
Dan Mallov For Connecticut (CT)					Origin	al 10/13/2009	
R. Itemization of Reimburse	ements to Committe	ee Workers and	Consultants				
Name of Worker/Consultant  Mr. Stanton Lesser  Secondary Payee			Date of Payment 07/08/2009  Purpose of Expenditure		ent	Amount	
Bravo Restaurant		FNDR		Debit Care	1		
Street Address 1418 Post Rd	City Fairfield		State CT	Zip Code 06824-5909	)		
which reimbursement is sought?	idate(s) Name	Office	Sought	Event#			
Yes  No						\$127.00	
Name of Worker/Consultant  Matthew Gianquinto			Date of Payment 07/17/2009		ent	Amount	
Secondary Payee Sprint		Purpose o	f Expenditure	1161 Debit Care	i		
Street Address 307 Connecticut Ave	City Norwalk		State CT	Zip Code 06854-1805	5		
	idate(s) Name	Office	Sought	Event#			
which reimbursement is sought?  Yes  No						\$167.55	

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origin	nal 10/13/2009		
R. Itemization of Reimburs	ements to Committee Worl	kers and	Consultants					
Matthew Gianquinto 0		Date of Pourpose of		Method of Paym  X Check #  1161  Debit Care		Amount		
USPS Street Address West Avenue Station	City Stamford	RCW	State CT	Zip Code 06911				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	lidate(s) Name	Office	Sought	Event #				
x No		1				\$17.50		
Name of Worker/Consultant  Matthew Gianquinto		Date of Payment 07/17/2009		Method of Payment  X Check #  1161		Amount		
Secondary Payee USPS		RCW	f Expenditure	Debit Care	d			
Street Address West Avenue Station	City Stamford		State CT	Zip Code 06911				
Description				Event #				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	lidate(s) Name	Office	Sought	•		\$220.00		

IV. EXPENDITURES								
NAME OF COMMITTEE					FILIN	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origin	al 10/13/2009		
R. Itemization of Reimburse	ements to Committee V	Workers and	Consultants					
Katharine S. Urbank		07/28/	Date of Payment 07/28/2009  Purpose of Expenditure		ent	Amount		
Street Address 51 Richards Ave	City Norwalk	RCW	State CT	Zip Code 06854-2309				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought	Event#		\$125.93		
Name of Worker/Consultant Katharine S. Urbank		Date of Pa		Method of Payment  X Check #		Amount		
Secondary Payee Party City		Purpose o	f Expenditure	1179 Debit Card	l			
Street Address 2255 Summer St	City Stamford		State CT	Zip Code				
Description  Is this expenditure coordinated with another candidate for which reimbursement is sought?  Other Candidate	date(s) Name	Office	Sought	Event#				
Yes  X No						\$38.12		

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origir	nal 10/13/2009		
R. Itemization of Reimburso	ements to Committee Work	ers and	Consultants					
		Date of Payment 07/28/2009		Method of Paym  X Check #  1179	ent	ent Amount		
Secondary Payee Costco Wholesale Club	1		f Expenditure	Debit Card	i			
Street Address 799 Connecticut Ave	City Norwalk		State CT	Zip Code 06854-1615	5			
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought	Event#		\$28.61		
Name of Worker/Consultant Katharine S. Urbank		Date of Pa		Method of Paymer		Amount		
Secondary Payee High Ridge Copy		Purpose o	f Expenditure	1179  Debit Card	i			
Street Address 1009 High Ridge Rd	City Stamford		State CT	Zip Code 06905-1602	2			
Description  In this arranditure coordinated with another condidate for Other Condi	idata(s) Nomo	066	Sought	Event#				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  Yes	idate(s) Name	Office	Sought			¢9.85		

IV	V. EXPENDITURES						
NAME OF COMMITTEE					FILIN	NG DUE DATE	
Dan Mallov For Connecticut (CT)					Origin	nal 10/13/2009	
R. Itemization of Reimb	ursements to Committe	e Workers and	Consultants				
Katharine S. Urbank 0		07/28/	Date of Payment 07/28/2009  Purpose of Expenditure		nent	ent Amount	
Subway Sandwiches and Salads		RCW	. Experiance	Debit Care	d		
Street Address 1007 High Ridge Rd	City Stamford	<u>'</u>	State CT	Zip Code 06905-1602			
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	Candidate(s) Name	Office	Sought	Event#		\$17.37	
Name of Worker/Consultant  Dimitar Naydenov		Date of Page 17/		Method of Payn	nent	Amount	
Secondary Payee Metro-North Railroad		Purpose o	f Expenditure	1185  Debit Care	d		
Street Address Grand Central Terminal 89 E 42nd St	City New York		State NY	Zip Code 10017			
Is this expenditure coordinated with another candidate for which reimbursement is sought?	Candidate(s) Name	Office	Sought	Event#			
Yes X No.						¢18 75	

IV. EXPENDITURES								
NAME OF COMMITTEE					FILIN	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origin	nal 10/13/2009		
R. Itemization of Reimburs	ements to Committee Wor	kers and	Consultants					
		Date of P		Method of Paym  X Check #  1186	nent	Amount		
Secondary Payee Sprint		Purpose o	of Expenditure	Debit Care	i			
Street Address 307 Connecticut Ave	City Norwalk		State CT	Zip Code 06854-1805				
Description				Event#				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$167.55		
Name of Worker/Consultant  Katharine S. Urbank		Date of Payment 09/05/2009		Method of Payment  X Check #		Amount		
Secondary Payee Staples		Purpose o	of Expenditure	1198 Debit Care	i			
Street Address 51 Richards Ave	City Norwalk		State CT	Zip Code 06854-2309	)			
Description				Event#				
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$160.36		

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origir	nal 10/13/2009		
R. Itemization of Reimburso	ements to Committee Work	ers and	Consultants					
		Date of Payment 09/05/2009		Method of Paym  X Check #  1198	ent	ent Amount		
Secondary Payee Staples		Purpose of Expe		Debit Card	i			
Street Address 51 Richards Ave	City Norwalk		State CT	Zip Code 06854-2309	)			
Is this expenditure coordinated with another candidate for Other Candwhich reimbursement is sought?	idate(s) Name	Office	Sought	Event #				
Yes  X No						\$42.36		
Name of Worker/Consultant  Katharine S. Urbank		Date of Payment 09/05/2009		Method of Payment  X Check #		Amount		
Secondary Payee High Ridge Copy		Purpose o	f Expenditure	1198  Debit Card	i			
Street Address 1009 High Ridge Rd	City Stamford		State CT	Zip Code 06905-1602	2			
Description				Event #				
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes	idate(s) Name	Office	Sought			¢6.10		

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origin	nal 10/13/2009		
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants					
Katharine S. Urbank 0		Date of Pourpose of		Method of Paym  X Check #		Amount		
High Ridge Copy		RCW		Debit Card	d			
Street Address 1009 High Ridge Rd	City Stamford		State CT	Zip Code 06905-1602				
which reimbursement is sought?	idate(s) Name	Office	Sought	Event #				
Yes No						\$66.60		
Name of Worker/Consultant Katharine S. Urbank		Date of Payment 09/05/2009		Method of Payment  X Check #		Amount		
Secondary Payee USPS		Purpose o	of Expenditure	1198  Debit Card	d			
Street Address West Avenue Station	City Stamford		State CT	Zip Code 06911				
Description				Event #				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes No	idate(s) Name	Office	Sought	•		\$176.00		

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Dan Mallov For Connecticut (CT)					Origin	nal 10/13/2009		
R. Itemization of Reimburs	ements to Committee	Workers and	Consultants					
Katharine S. Urbank		Date of P. 09/05/		Method of Payn  X Check #  1198  Debit Car		Amount		
Staples Street Address 51 Richards Ave	City Norwalk	RCW	State CT	Zip Code 06854-2309				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	didate(s) Name	Office	Sought	Event #		\$46.62		
Name of Worker/Consultant Katharine S. Urbank		Date of P. 09/29/		Method of Payment  X Check #		Amount		
Secondary Payee USPS		Purpose o	of Expenditure	1222  Debit Car	d			
Street Address West Avenue Station	City Stamford		State CT	Zip Code 06911				
Description		2.5		Event #				
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	lidate(s) Name	Office	Sought			\$25.20		

IV. EXPENDITURES						
	ZALENDITURES					
NAME OF COMMITTEE						NG DUE DATE
Dan Mallov For Connecticut (CT)  Original					Origin	nal 10/13/2009
R. Itemization of Reimbursements to Committee Workers and Consultants						
Name of Worker/Consultant Date of Payment Method of					nent	Amount
Katharine S. Urbank		09/29/2009		X Check #  1222  Debit Card		
Secondary Payee		Purpose of Expenditure				
USPS	1	RCW	1			
Street Address West Avenue Station	City Stamford	State CT		Zip Code 06911		
Description	•		!	Event #		
	idate(s) Name	Office	Sought	•		
which reimbursement is sought? Yes						
x No						\$17.50
Name of Worker/Consultant Dr		Date of Payment		Method of Payment  X Check #		Amount
Katharine S. Urbank		09/29/2009				
Secondary Payee		Purpose of Expenditure		1222		
USPS		Purpose of Expenditure  RCW		Debit Card		
Street Address	City		State	Zip Code		•
West Avenue Station	Stamford		СТ	06911		
Description				Event #		
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought?	idate(s) Name	Office	Sought			
Yes						
X No						\$176.00

IV. EXPENDITURES						
	ZALENDITURES					
NAME OF COMMITTEE						NG DUE DATE
Dan Mallov For Connecticut (CT)  Origi					Origin	nal 10/13/2009
R. Itemization of Reimbursements to Committee Workers and Consultants						
Name of Worker/Consultant Date of Payment Method of Payment						Amount
Katharine S. Urbank		09/29/2009		X Check #  1222  Debit Card		
Secondary Payee		Purpose of Expenditure				
USPS	1	RCW	1	Ϊ		•
Street Address West Avenue Station	City Stamford	State CT		Zip Code 06911		
Description	!			Event #		
	idate(s) Name	Office	Sought	•		
which reimbursement is sought?  Yes						
x No						\$4.95
Name of Worker/Consultant Date of Payment		ayment	Method of Payment  X Check #		Amount	
Katharine S. Urbank		09/29/2009				
Secondary Payee		Purpose of Expenditure		1222		
Costco Wholesale Club	Purpose of Exper		Debit Card		d	
Street Address	City		State	Zip Code		
799 Connecticut Ave	Norwalk		CT	06854-1615	5	
Description				Event #		
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought?	idate(s) Name	Office	Sought			
Yes						
X No						\$61.47

IV. EXPENDITURES						
NAME OF COMMITTEE					FILI	NG DUE DATE
Dan Mallov For Connecticut (CT)					Origin	nal 10/13/2009
R. Itemization of Reimbursements to Committee Workers and Consultants						
Name of Worker/Consultant Katharine S. Urbank	Date of Pa 09/29/			Method of Payment  X Check #  1222  Debit Card		Amount
Secondary Payee USPS		Purpose of Expenditure RCW				
Street Address West Avenue Station	City Stamford		State CT	Zip Code 06911		
Description				Event #		
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes  No	date(s) Name	Office	Sought	•		\$4.95
				Total of Se	ection R	\$1,726.34

IV. EXPENDITURES						
NAME OF COMMITTEE					FILING DUE DATE	
Dan Malloy For Connecticut (CT)					Original 10/13/2009	
S. Surplus Distribution of Equipment and Furniture						
Name of Recipient					Original Purchase Amount of Item	
Street Address	City	State	Zip Code			
Description						
Total of Section S						